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“GOOD TO GO!”

MARINES, COMBAT, AND THE CULTURE OF SILENCE

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14. ABSTRACT Marines go through boot camp and acquire a toughened mindset and a rich understanding of Marine Corps history. In the infantry battalion, Marines learn again and again to maintain a toughened mindset and uphold the ethos of the Corps. Going to war does not cause all warriors to have inner hidden wounds, but war does change all warriors. For some, but not all, warriors who do go to war and directly encounter or witness traumatic experiences while outside the wire, combat leaves a lasting hidden inner wound, PTSD. Marine infantry culture appears to have an unspoken message of never showing weakness, which has kept some Marines from going to mental health professionals for help.				
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“Good to Go!”: Marines, Combat and the Culture of Silence

“*War is hell!*” These words are believed to have been said by General William T. Sherman in 1863 during our nation’s Civil War. With this metaphor, General Sherman captures the reality of war as a place of life-threatening terror, of carnage where life expectancy is unknown, of danger where warriors must be constantly hypervigilant, of all-pervasive and inescapable death. Combat veteransⁱ (whom I shall refer to as warriors) live in such a hell for the duration of their tour of duty, and for those who suffer trauma, beyond it as well.

Combat is like a coin; it has two sides. One side depicts the heat of battle where the warrior is conditioned to return fire and take lethal action against the opposing force called “*the enemy*” in order to stay alive and keep his fellow comrades alive. The other side is the shame and guilt a warrior feels from having killed another human being or from *survivor’s guilt* for failing to keep his comrade from being killed. According to former Navy Psychiatrist William Nash, the most traumatic combat event for warriors who fought in Afghanistan and Iraq was “witnessing the violent death of a buddy or valued leader...(or) failing to save a buddy from death.”¹ Combat veterans who step “outside the wire”ⁱⁱ personally know the carnage of war, for they see, hear, and smell it all around them. Warriors know in their bones that war is hell.

The traumatic damages of war can last a lifetime. Trauma experienced in war, according to Judith Herman, can “produce profound and lasting changes in physiological arousal, emotion, cognition, and memory.”² Traumatic experiences are a part of combat, and those who engage in combat will find their understanding of life severely challenged. Some will question their understanding of faith while others will attest that they have grown closer to God as a result of their war experience. War challenges warriors to adapt and survive. Warriors come home changed, and the loved ones awaiting them can find it challenging to reconnect to someone so profoundly affected by war.

ⁱ This essay concentrates primarily on Marine Corps infantry and at the writing of this paper women are not a part of any infantry battalions. Therefore, masculine pronouns shall be used throughout while referring to Marines.

ⁱⁱ “Outside the wire” is military jargon for being beyond the relatively safe confines of a base camp. Marine infantry will step “outside the wire” when on patrol or maneuvers, and have a greater risk for being fired upon, ambushed, or otherwise dealing with the carnage of war in an up front and personal manner.

The Marine Corps is filled with young adults, many of whom are still in their late teens. Witnessing a person's death is not an expected part of young adult life in modern America. And yet, warfare places young warriors in an environment where there is destruction, trauma, and death. Warriors can have their belief system shattered when the evidence of war does not align with their understanding of how life is supposed to be. The sound of enemy gunfire, the earth-shaking impact of artillery, and the horrific destruction of improvised explosive devices (IEDs) all signal the eerie closeness of death. The constant hypervigilance necessary to stay alive under such conditions can bring about alterations to basic pathways in the brain. The nervous system itself undergoes traumatic changes. Warriors in combat can thus be wounded mentally even if they remain physically unharmed.

Rigorous physical and mental training keeps Marines in the fight; they are often able to use "muscle memory" to stay attuned to what they should do in the heat of the moment. Warrior training that develops a Marine's ability to overcome all obstacles with a hardened body and a toughened mindset, coupled with a determination never to give up, may, however, keep a Marine from admitting that he needs help. Patricia Watson, a clinical psychologist who served for eight years in the U.S. Navy, has expressed concern that the warriors who need psychological help are reluctant to seek it because they do not want to appear *weak*. For a combat Marine, appearing *weak* undermines the renowned warrior image that lies at the core of his identity. Since warriors never want to appear weak, even when coming home from combat, can this compel a *culture of silence* where the life changing traumatic experiences of war, those that leave a hidden wound, are never spoken of in order to appear strong. From her vantage point, Dr. Watson notes that this perceived "stigma [to not show weakness] is a very strong barrier to receiving mental health care."³

One prominent but often hidden wound of war that can have an effect on the lives of warriors and their loved ones is Post Traumatic Stress Disorder (PTSD). The clinical diagnosis of PTSD became part of the psychiatric Diagnostic and Statistical Manual III (DSM-III) in 1980.ⁱⁱⁱ Although the diagnostic criteria for PTSD today are generally the same as those described in 1980, the latest DSM-V (2013) has developed the criteria with more nuance and specificity. (See Appendix A for a description of the criteria to determine PTSD). Recognizing that all combat veterans have unique responses to surviving the traumas of war, and with the further understanding that not all combat veterans end up having mental health problems, this essay will focus primary attention on those elements in a warrior culture that prevents those who meet the criteria for a PTSD diagnosis from admitting their need for help. “Veterans of Iraq and Afghanistan are being diagnosed with PTSD in record numbers and show signs of struggling with all the demons experienced by veterans of earlier wars: substance abuse, failed relationships, difficulty in maintaining work, even suicide.”⁴ What are the elements in the warrior culture of combat Marines that keep veterans with PTSD from getting the help they need?

A Culture of Toughening Heart, Soul, and Mind – USMC Boot Camp

In basic training, recruits are stripped of their civilian identities. They are shaved, renamed, reclothed, and retrained to behave according to the belief that loyalty to the group matters above one’s own life. Their value system is transformed; they are indoctrinated with the group’s higher purpose they are now meant to serve. They are taught they are no longer individuals; their autonomy no longer matters and in fact can be dangerous. They are led by decorated elders whom

ⁱⁱⁱ In 1980, the American Psychiatric Association (APA) added PTSD to the third edition of its Diagnostic and Statistical Manual of Mental Disorders (DSM-III). From an historical perspective, the significant change ushered in by the PTSD concept was the stipulation that the etiological agent was outside the individual (i.e., a traumatic event) rather than an inherent individual weakness (i.e., a traumatic neurosis). The key to understanding the scientific basis and clinical expression of PTSD is the concept of "trauma." The latest revision, the DSM-5 (2013), has made a number of notable evidence-based revisions to PTSD diagnostic criteria. PTSD is no longer categorized as an Anxiety Disorder. PTSD is now classified in a new category, Trauma-and Stressor-Related Disorders, in which the onset of every disorder has been preceded by exposure to a traumatic or otherwise adverse environmental event. (U.S. Department of Veterans Affairs, PTSD: National Center for PTSD).

they respect, salute, and address honorifically. These elders serve as role models; their higher status is a goal recruits are taught they might attain if they are man enough, good enough, devoted enough. They are expected to be willing to make the supreme sacrifice for the ideals beyond themselves.⁵

The Marine Corps does not make light of the fact that boot camp is very demanding physically and mentally. Recruits enter boot camp with a thirst to earn the right to be called a Marine. Recruits understand that they will have to struggle to prove themselves worthy; they will consistently have to perform at a high standard with the ultimate goal of never quitting, because if they quit, they will be excluded from the group.

During the twelve training weeks of boot camp, two separate days are spent on teaching Marine Corps' history. This great warrior legacy is then constantly referenced and reinforced all through boot camp, thus giving recruits a strong understanding of the rich heritage that they deeply desire to be a part of. For some young men, boot camp may serve as a "male rite of passage, a culturally authorized way of becoming a man."⁶

Peer pressure is common, as recruits long to prove themselves worthy and never desire to appear weak or vulnerable, thus falling short of the mythic image of great warriors. This pressure can lead to a struggle always to appear strong, and it can develop a culture of silence where the recruit learns to say what the Drill Instructor (DI) would like to hear instead of what he really feels. From boot camp to the Fleet^{iv} a common response to the question, "How are you doing?" is the response, "Good to go!" Whether they are feeling great from head to toe or not does not matter; this is the answer most often given...the answer they learned at boot camp.

Recruits learn the history of battles fought, with details about legendary Marines who overcame great odds by holding to the Marine core values of honor, courage, and commitment.

^{iv} In 1933 the Marine Corps was reorganized into the Fleet Marine Force, formally establishing the "command and administrative relations" between the Fleet and the Marine Corps.

Legendary Marines were never willing to give up or give in. Immersion in an increasingly stressful environment helps recruits build confidence through their accomplishments. Confidence is inlaid with heritage core values and built through the successful completion of stressful events, giving recruits the edge that they will need to survive combat.

During boot camp a recruit will grow into the understanding that the greatest fear is not death, but letting down your fellow Marine in combat. During the battle of Fallujah, Gunnery Sergeant (GySgt) Nick Popaditch was severely injured. He stated that his “greatest fear was not of dying but that he would mess up and let down his fellow Marines.”⁷ This persistent bond of brotherhood begins in boot camp and is reinforced out in the Fleet and honored during times of war. I recently spoke with a Staff Sergeant (SSgt) who was a Drill Instructor (DI) on the West Coast in 2010. SSgt Molinanavarro revealed to me what takes place when recruits arrive at boot camp.

From the first day recruits are indoctrinated with USMC history, drill, customs and courtesies, all of the training at camp has a combat focus. Recruits learn combat orientation from day one. It doesn’t matter what the military occupation specialty is, all Marines are combat oriented, and all Marines are riflemen.⁸

In order for recruits to become Marines, they need to adhere to a new way of living: following orders, staying in shape, and gaining combat-ready skills. “The goal of military training is to arm each warrior with a set of automatized response patterns that can be trusted to reliably occur in operational situations, regardless of the perceived danger or stress level.”⁹ Why do recruits encounter increasing amounts of stress while in boot camp? Because they are being trained for the conditions of combat.

“In the operational theater, stressors come fast and furious, and they can pile high and deep. Through training and experience, warfighters can accommodate to some of them – they can change themselves physically and mentally to be as suited as they can be to meet the challenges they face. And through the proper equipment, teamwork, and leadership, they can neutralize, or at

least mitigate, a portion of the stress of war.”¹⁰

As recruits desire to earn the right to be called a Marine, they become loath to acknowledge anything that might look like weakness to their peers. They begin to internalize a “culture of silence” about their true feelings, ever ready with a bright and positive reply that they are “good to go” at all times. What is it that attracts young men to join the Marines? Is it the strong sense of brotherhood that is written about in books and seen in movies? Is it the distinctive Marine identity as an elite warrior? Some have argued that no other members of our Armed Forces (Army, Air Force, Navy, or Coast Guard) “live out” their military identity as Marines do. A Marine “is a Marine 24 hours a day, 7 days a week, rain, shine, leave, weekends, and holidays”¹¹ It has been suggested that when you ask a person what “he does for a living, a sailor would likely respond, ‘I’m in the Navy.’ An airman would likely respond, ‘I’m in the Air Force.’ A soldier would probably reply, ‘I’m in the Army.’ When asked the same question, a Marine will answer, ‘I AM a Marine.’”¹² Being a Marine is more than a name, more than a job; it is a way of life.

In order to become a Marine, a recruit has to go above and beyond to prove himself worthy while at boot camp for twelve intensive weeks. One boot camp Drill Instructor comments:

We repeatedly take recruits to the brink of exhaustion, where commitment is truly tested. These moments of truth not only separate the capable from the unable, they build exceptional strength, stamina and confidence in those who find a way within themselves to continue.¹³

Recruits soon realize that their goal of becoming a Marine is a demanding, stressful struggle both physically and mentally. Boot camp is a time of warrior conditioning, where there is constant reiteration of the importance of being a *strong team member* while fostering a mindset that is

determined to overcome all obstacles. Marine boot camp sets in motion a warrior's mindset always to appear strong. The internalized and unspoken message of always appearing and sounding strong can hinder the efforts of Marines who are traumatized to acknowledge their need for help, especially with mental health.

During boot camp, DIs use their training and skills to bring out the *warrior* in every recruit. Recruits learn how aggressively to use hand-to-hand combat, a bayonet, or rifle to kill an opponent, most often referred to as *The Enemy*. Boot camp teaches recruits how to be lethal warriors on the battlefield. Each week of boot camp has an accelerated focus that builds upon the knowledge gained in the preceding weeks.

During week nine the recruits go through various challenges, first as individuals and then as teams. Recruits are placed into four-man combat fire teams that will start and complete all challenges together. The essence of a Marine combat team has always been that no one is ever left behind. This type of team thinking and maneuvering will be repeated in combat as each Marine watches over the warrior on his right or left, building the trust and confidence to overcome various battlefield challenges. Since Marines have been known historically never to leave a Marine behind in combat, this contributes to the bonding and powerful sense of comradeship that takes place on the battlefield. This fundamental precept is a reason why so many Marines feel guilty when they could not protect or stop their fellow team member from being injured or killed.

There is a continual thread that runs all through boot camp: the necessity of being part of a team at all times. During week nine recruits learn repeatedly that warfare is bigger than one individual person; it is all about taking care of your fellow Marines. All along the way, recruits have had to overcome, adapt, and push themselves in their quest to become a Marine. In order to

do this, the recruit must pass what is known as “The Crucible.”

The Crucible is the final phase of Marine Corps Recruit Training that tests every skill learned and every value instilled. Recruits will be challenged for 54 continuous hours with little food and sleep. To complete this final test, recruits must have the heart—and the intestinal fortitude, the body—and the mind, the desire—and the ability. The recruits must pull together or fall apart. Win as one or all will fail. Succeed, and you will carry a sense of accomplishment that will last forever.¹⁴

At the end of The Crucible, “recruits march to the Emblem Ceremony where Drill Instructors present their platoons with the Marine Corps Emblem — the Eagle, Globe and Anchor — and address recruits as *Marine* for the first time.”¹⁵ This is the culmination of their twelve weeks of challenges, obstacles, and stressful conditions that molded them as Marines. The title Marine has to be earned, and not everyone who enters boot camp will end up meeting the standards to be given such a hallowed name. One young Marine described his experience:

Fifty-five hours ago we stepped off on our crucible. We are tired, we are hungry, and we are sore. But we are here. We are here to join with those who came before us to claim the title of United States Marine. ... You (DIs) forced us to rely on each other and on you, and you forged us into a team to prepare us for this day when we join the band of brothers and sisters known simply as *The Corps*.¹⁶

One must grasp the particulars of boot camp in order to gain an essential understanding of how thirteen total weeks of intensive, calculated, and demanding indoctrination establishes the warrior’s mindset. These weeks of developing a warrior’s mindset contribute to a tendency to deny one’s need for help. Even with severe PTSD symptoms, a Marine may refuse to seek help due to the warrior’s mindset developed in boot camp.

Marine boot camp is fundamental to the formation of warriors. “[Boot camp] was designed to undermine all the past concepts and beliefs of the new recruit, to undermine his civilian values, to change his self-concept -- subjecting him entirely to the military system.”¹⁷ Young “men are recruited at a psychologically malleable age” where they “are given the threat

of authority, the absolution and pressure of group.”¹⁸

The military uses “operant conditioning” in training their recruits. “B.F. Skinner held that he could turn *any* child into *anything* he wanted to”¹⁹ by using operant conditioning. The military use of *operant conditioning* differs from classical conditioning, according to Lieutenant Colonel Dave Grossman, a former Army Ranger and author of the book *On Killing*. To overcome the fundamental Judeo-Christian moral tenet “Thou shalt not kill,” operant conditioning is used during boot camp. Recruits fire at targets that are cut in the shape of a human silhouette and that are often referred to as “The Enemy.” Dehumanization has been used throughout the course of history to refer to the opposing combative group in terms that are derogatory and less than human. The simple word *enemy* is used to reveal that the opposing force in combat is less than human. Warriors have reported that they killed the *enemy* without thinking that they were really killing fellow human beings.

Dehumanization and desensitizing along with using a silhouette representing the enemy is a form of operant conditioning. When a recruit is on the firing range, an enemy silhouette target will quickly pop up. If the target is hit, then it will lower, reinforcing the conditioned behavior that it is okay to fire at and kill the enemy. Recruits who do well on the range can earn an honored pin, the Marksmanship badge. Shooting at enemy targets builds what is known as “muscle memory.” On the battlefield there is not time to think when under fire, but muscle memory can elicit the conditioned trained response to quickly return fire according to the Rules of Engagement^v (ROE) and the commander’s direction.

The history of great Marine warriors and battles won by Marines is retold again and again

^v Rules of Engagement (ROE) regulate a commander’s means and methods of warfare by granting or withholding the authority to use certain weapons, weapons system, or tactics. ROE may also reemphasize the scope of the mission. Units deployed overseas for training exercises may be limited to use of force only in self-defense, reinforcing the training rather than combat nature of the mission (USMC Officer Basic Course, Law of War).

from the first to the last day of boot camp. One Marine who earned his Marine Emblem stated that he “hoped to live up to the legacy of the Eagle, Globe and Anchor.”²⁰ This statement shows how a Marine can develop a codified mindset to be a great warrior like those who have gone before. It is important to understand that the Marine Corps is a *way of life*.

One article on Marine recruits comments, “There is not room in our ranks for those who fall behind.”²¹ Therein lies the essence of my argument. Recruits are pushed to go above and beyond, and those who fail to meet this standard will not make it to become a Marine, will not complete the rites to join this brotherhood of honored warriors. Young Marines longing to uphold the warrior’s ethos are “instinctively aware that warfare is such a rite, and they can suffer great psychological pain if they perceive themselves as having failed.”²²

How big is the influence of the Marine Corps rich heralded history upon the present Marine’s way of thinking and living? Huge! One GySgt reflected upon hearing the Marine’s Hymn:

And every time the song plays, those Marines [of history] stand among us. Leathernecks. Devil Dogs. Warriors who never knew defeat going back 230 years. Kicking the shit out of the Barbary pirates. Running toward German machine guns in Belleau Wood. Landing on the beach at Tarawa. Names of men, battles, hallowed places sound in the head and heart. Chesty Puller at Chosin Reservoir. The grunts dug-in at Khe Sanh. Guys, sung and unsung, putting their asses on the line right now. The big things Marines have done and do to this day makes each of us bigger. The strength of the Marine is the Corps, and the strength of the Corps is the Marine. These aren’t just words. Men fight and die because they refuse to be anything less than Marines and do all that our great tradition requires.²³

A Culture of Silence: Accumulation of Traumatic Experiences

“The word ‘trauma’ comes from the Greek word for *wound*.”²⁴ Warriors who engage in combat will at varying times witness horrific things. While some warriors develop no problems, some may end up more susceptible to PTSD. How can it be that the traumatic imagery of warfare

has different effects on warriors? Babette Rothschild, author of the book, *The Body Remembers*, describes how “stressful events during early development as a child: neglect, physical and sexual abuse, failure of the attachment bond, and individual traumatic incidents (hospitalization, death of a parent, car accident, etc.)”²⁵ can predispose a person to being more susceptible to PTSD as an adult.

During World War I and World War II, Adolph Meyer was a dominant voice in psychiatry, and his “school of thought emphasized the importance of individual characteristics, including past life experiences, in shaping a person’s response to stressful situations like combat.”²⁶ A warrior’s early childhood can often predict his or her capacity either for resiliency or for susceptibility to PTSD when encountering a trauma as an adult. Small children need a safe environment with loving, affirming parents in order to develop into what has been described as a “psychologically and physically”²⁷ healthy adult. Children need to *hear* from their parents that they are loved, and likewise, children need to *feel* that they are loved by their parents. The gestures of speaking and showing love are very important because children have a need to “develop healthy attachments to adults.”²⁸

Can a warrior’s early childhood really make a difference in his ability to cope with battlefield trauma? Jon Allen argues that a person’s “ability to cope with trauma has strong foundations in [the person’s] history of attachment relationships.”²⁹ During the formative years of early childhood, strong bonds of attachment can establish what Allen refers to as a “feeling of security.”³⁰ How does this impact warriors and trauma? “Trauma disrupts trust.”³¹ A critical part of childhood is “basic trust.” Judith Herman states that “trust sustains a person throughout the lifecycle. It forms the basis of all systems of relationship and faith.”³² A warrior needs to encapsulate the ability to trust and be trustworthy. Having a “secure attachment is the antidote to

trauma.”³³

Every adult is a composite of his childhood and young adult experiences. The warrior with a stressful or traumatic childhood can be more vulnerable to developing PTSD when encountering the traumatizing conditions of warfare. Military personnel “exposed to combat service are known to be at greater risk for developing PTSD.”³⁴

Military personnel who have been in combat repeatedly are more susceptible to PTSD than those who have never been in the heat of battle. In this area of psychological research, one of the key findings “has been in the recognition that the *accumulation* of stressful events over the course of a lifetime increases an individual’s risk of developing PTSD.”³⁵ According to this research, a Marine will be at greater risk for developing PTSD from combat experience if he also has significant traumatic events from his childhood.

A recent study focused on whether the cumulative effects of violence from war had an impact on 50 Iraq and Afghanistan veterans. Predeployment stressful events and combat exposure were documented as part of the interview process. The study revealed that veterans who “reported witnessing and engaging in more combat in Iraq or Afghanistan were also likely to report more severe PTSD symptoms.”³⁶

Multiple combat deployments can have an impact upon a warrior’s mental health through re-traumatization. When a Marine infantryman is deployed to hot spots (areas with heavy firefights) he will eventually witness the carnage of war. When he is deployed a second time to a hot spot, he is more susceptible to PTSD since he may have already had a traumatizing event in his own personal history. For instance, “by the beginning of 2007, one third of American troops had served at least two tours in a combat zone, and 70,000 individuals had been deployed at least three times.”³⁷ Repetitive deployments can be damaging to a warrior’s mental

health. During the first deployment, the warrior may have been involved or witnessed a traumatizing event that threatened their well-being. A second and third deployment builds upon the traumatic damage of the first deployment. Warriors often do not want to admit that they need help with mental health issues, so the cumulative effect of continuing warfare can lead to the hidden wound, PTSD.

A “recent army study of combat exposure along some eighty-eight thousand military personnel returning from Iraq and Afghanistan found that 66 percent reported firing their weapons, witnessing death or injury, or feeling in danger of being killed. At the same time only 12 percent of individuals in the same group are found to be showing signs of possible PTSD.”³⁸ I feel two questions need to be asked of this study. First, what percentage of the total personnel were heavily involved with combat arms such as the infantry? This is important because it takes the infantry out of the main grouping to a specific subset. Second, to what extent is the report accurate since many returning troops do not want to admit any problems as this may delay their ability to go on leave? Often times a returning warrior will be hesitant to put down on paper anything that might hinder his return from war to that of going on leave as soon as possible once back on the home front.

Consider the “Lance Corporal Underground.” This is an unofficial message system where one Lance Corporal sees, hears, and experiences something related to the Marine Corps and passes it along. Sometimes the information is right on target, and other times the message is not absolutely correct. The Lance Corporal Underground can easily pass along a message of how one Marine admitted on the end of deployment mental health survey to have had a minor mental health issue which in turn caused him to be retained, and not allowed to go on post-deployment leave once arriving home from war. At the end of a combat deployment for six plus months,

Marines are eager to go home and see loved ones and friends. If a Marine gets the message that checking the survey YES for any problem (sleep, anxiety, depression, anger, etc.) will mean that they will be delayed from going on post deployment leave, this can and does thwart the accuracy of mental health surveys.

The infantry is the primary combat arm of the Marine Corps. While other military occupational skills might remain *behind the wire*, it is the infantry who continually step outside the wire, raising their risk for injury or death. It is the infantry who “are trained to locate, close with and destroy the enemy by fire and maneuver, or repel the enemy's assault by fire and close combat.”³⁹ Thus, it is the Marine infantryman who can more readily be re-traumatized on multiple deployments and be confronted with the painful symptoms of PTSD. Combatants “face the threat of their own death or injury and also witness the death, wounding, and disfigurement of their companions, enemy forces, and civilians.”⁴⁰ It is the infantry who serve as a “band of brothers” and lean on one another to stay alive while in battle.

During the past year I have spoken to Marines who have fought in the heat of battle in Iraq and Afghanistan and who have the *hidden wound of war*, PTSD. Due to re-traumatization and the horrific imagery of war, each one I spoke to lives with the diagnosis of PTSD and is no longer able to serve due to their *hidden wounds*. Each veteran who served in battles in the Middle East has told me during conversations, “I miss the camaraderie; I miss being a Marine.” There is a saying, “once a Marine always a Marine,” and this is true for those on active duty, those serving in the reserves, those no longer serving, those who have retired, and those medically discharged. They are all at different levels of life, but they are all Marines.

It is hard for some Marines to sleep at night because, in a combat zone, this is when the enemy would prefer to attack. One Marine veteran who served with the infantry for two tours in

Afghanistan told me, “I would feel safe and perhaps could rest better at night if only a Marine were here standing guard.”⁴¹ Marines who have been to war know the value of having a fellow Marine standing guard, standing the watch. A former Marine infantry machine gunner told me of his personal esteem for his trusted brother in arms: “If there ever was something that you wanted secure, you would want a Marine to guard it. If you have two Marines together there are endless possibilities, because they would never let each other down.”⁴² This is a battle-tested faith; I can lie down and rest securely because a Marine has the watch.

Many Marines are reluctant to go to behavioral health clinics. In order to get such help, a Marine would have to admit weakness, a “weakness of the brain,” as some warriors see it. The stigma of mental illness is not just a Marine concern, it is a concern for all branches of the military.

A Culture of Preparation and Readiness for War

The Marine Corps recruits young, aggressive men and subjects them to Spartan living conditions, draconian discipline, and months of charismatic indoctrination into a warrior culture. By the end of Boot Camp they have become more than men: they are Marines. Out in the Operating Forces new Marines are rigorously trained in the practical application of targeted violence. Their bodies are conditioned to endure the grueling hardships of war and their minds are conditioned to operate above a survival level in the most terrifying, brutal, and unforgiving environment known to man. The Marine Corps does this because it is expert at fighting and winning our Nation’s wars and it knows that in order to win you must have trained men willing and able to kill.⁴³

How can Marine infantry best prepare for combat? Pre-deployment training and conditioning builds upon the lessons begun at boot camp and refined at the Infantry Training Battalion course. In the heat of battle Marines’ training and conditioning for combat guides their responses to different scenarios of warfare. Warfare is full of sights, sounds, smells, and intense emotions. These are not the normal day-to-day stressors of civilian life, far from it; this is

combat, structured, sanctioned violence requiring the taking of human life.

The Department of Defense is using new technologies to help Marines in combat “make better decisions on the battlefield, and prevent trauma.”⁴⁴ A mock Afghan village has been built at Camp Pendleton where Marines are presented with stressful conditions of war.

The “village” at Camp Pendleton is 130,000 square feet, complete with bazaar stalls, a small mosque, mounds of broken concrete, ersatz corn and poppy fields, drooping telephone wires, a heroin production mill and two-story buildings where snipers and Taliban sympathizers may lurk. There are 25 “smell generators,” six sound systems, 233 cameras for capturing the action indoors and outdoors, 20 animal pens (with fake sheep), weapons caches and crude labs for making roadside bombs. Some 40 Afghan “role-players” engage Marines in various scenarios, sometimes greeting them with friendliness, sometimes with hostility. Marines are faced with decisions on when to use their weapons, all being filmed for review later.⁴⁵

The intent at Camp Pendleton is for a Marine platoon or squad to enter the Afghan mock village and put their combat training and conditioning to use. Infantryman will keep constantly scanning the surroundings, keeping alert to visible people and hidden threats, using tactical movements, reacting to an IED and responding to two Marine casualties, one needing medical help, and one dead. This is simulated warfare, constantly demanding and full of emotion, with the anticipation of what might take place next, keeping the body and mind hyperalert.

After his platoon went through the mock Afghan village, a First Lieutenant gathered his young Marines, many with no combat experience and said, “We’re giving you these emotions now so when it happens for real, you won’t be acting so crazy. You’ll be able to calm yourself down.”⁴⁶ The first time a person encounters a life-threatening event, it can be overwhelming with different thoughts, feelings, and questions. Marines have to prepare for combat threats that can appear suddenly from insurgent attacks or explosives. Currently the Marine Corps is using the training villages at Camp Pendleton (West Coast) and Camp Lejeune (East Coast) to condition troops for actual combat scenarios. By “desensitizing Marines to the sights and sounds

of battle, the Marine Corps hopes to increase their effectiveness and decrease their risk of PTSD.”⁴⁷

The infantry has some of the youngest and most inexperienced Marines, who benefit from having a mock village that helps them understand what combat might look like when they are deployed.

By running mock scenarios that introduce mental and physiological strain, trainers can help troops adjust faster and perform better in the real situation, and make them less likely to be overwhelmed by chaotic or ambiguous events. This is inoculation, same as a flu shot: a dose of stress now can stave off more-severe effects later.⁴⁸

What is the goal for the mock villages? The “goal of the training is to increase the effectiveness and survivability of combat units.”⁴⁹ The mock village allows Marines to respond as if in the heat of battle and then, after the training scenario is over, there is time for an after-action review. Marines can be guided by the trainers at the mock villages in discussions regarding what worked well and what could have been a better response. There is old adage, “The more you sweat in peacetime, the less you bleed during war,” and it seems to fit well with Marine pre-deployment training and conditioning.

Marines are trained to be able to return fire according to the ROE during combat. However, when Marines return fire, they do so with the intent to kill the opposing force... who are also human. Killing often conflicts with religious or cultural beliefs. The operant conditioning and repetitive inoculation of boot camp enables Marines to use appropriate lethal force when fired upon. Boot camp can condition Marines to become desensitized to the death of an enemy combatant. But what happens to the Marine mindset when a fellow warrior is killed? In the heat of battle, there often is no time to sit quietly and grieve as there are no time-outs, no safety flags to wave, but only the continued stressors of engagement with the enemy.

Karl Marlantes is a highly-decorated combat veteran, awarded the Navy Cross, two Navy Commendation Medals for Valor, two Purple Hearts, and ten air medals while serving as a Marine infantry officer during the Vietnam conflict. Karl is unique, as he took a break from his studies as a prestigious Rhodes Scholar to serve as a Marine officer. How does Karl value such training in preparation for combat? He is an advocate for “realistic training [that] is designed to instill discipline, toughness, and inoculate Marines against stress.”⁵⁰ Karl experienced the carnage of war first hand and gives credit to the tough conditioning he received while at boot camp, the training that he relied upon during combat. Looking back upon his ability to survive horrific conditions of combat Karl wrote, “I was in situations where any reasonable person would have quit, but I had become a Marine and Marines aren’t reasonable people. Quitting is unthinkable and pain is just weakness leaving the body.”⁵¹ There is a strategic purpose for pre-deployment training. “The goal is to turn out tough, smart Marines who will function in combat the same way they function in training. This maximizes enemy casualties while minimizing friendly casualties.”⁵²

Pre-deployment training helps Marines learn how to manage stress, and it helps them hone their ability to return fire through muscle memory. How easy is it for a Marine who has never been to war kill another person? The ROE for combat set the conditions for when it is acceptable to kill an aggressor, insurgent, or enemy. This same young adult infantryman has most likely spent his childhood “being educated to behave with civilized restraint.”⁵³ Civilized restraint does not include killing. Both Jews and Christians have scriptures that simply state a person of faith is not to kill (Exodus 20:13). How can a young Marine who has culturally and religiously been taught that killing is wrong be conditioned to use appropriate lethal force, which includes having to return fire and kill, during the heated confusion of combat?

Grossman's book, *On Killing*, argues that the average person does not want to kill another human. His studies reveal that many combat veterans of World War II intentionally never fired at the enemy. Grossman declares "Not only does the average soldier's psyche resist killing and the obligation to kill, but he's equally horrified when exposed to the aggression of the enemy who hates him and denies his humanity enough to kill him."⁵⁴ Is it really that hard to kill another person even during the heat of combat? According to Grossman, the soldier in combat is trapped within this tragic Catch – 22.

If he overcomes his resistance to killing and kills an enemy soldier in close combat, he will be forever burdened with blood guilt, and if he elects not to kill, then the blood guilt of his fallen comrades and the shame of his profession, nation, and cause lie upon him. He is damned if he does, and damned if he doesn't.⁵⁵

In order to kill we have to give the adversary a name. The word "human" cannot be used, for this conflicts with culture and religion and the taboo of killing another human being. However, if the military can give the adversary a name such as Enemy, then they can become a *non-human entity*, a lowly life creature deserving of death. This is not something new. History has shown how "most primitive tribes took names that translate as "man" or "human being," thereby automatically defining those outside of the tribe as simply another breed of animal to be hunted and killed."⁵⁶

The military has always found useful degrading names for the adversary that can obscure the fact that they really are human. Dehumanizing names include "Jap, Krauts, gooks, slopes, dinks, Commies, and ragheads."⁵⁷ Dehumanization is the military tool that allows Marines the ability to get past their inhibitions towards killing. Their *training* to fire a weapon is interwoven with their *conditioning* that it is okay to kill the *enemy*.

Every part of preparing for war against the enemy is meticulously planned. Repetition is a great teacher for building a repertoire of strategic responses. Visualization allows for familiarity with battle scenarios to lessen the stress of actual combat. Conditioning of the brain imbues the will to fight as desensitization makes it morally acceptable to kill the enemy. Military “indoctrination has always had a powerful mental component, as soldiers learn to follow orders without question and withstand painful or mentally taxing situations.”⁵⁸

A Culture of War and Traumatic Experiences

In the current conflict, the role of Marine infantry is to get “up close and personal” with the local populace and engage the enemy by stepping outside the wire and entering homes and villages in Afghanistan. Traumatic situations can arise at any moment. Trauma, “at least in its clinical meaning, describes an event that involved a direct threat to self or others and that provokes a response of profound stress and anxiety.”⁵⁹ This is where the infantry do their best work, in an environment where there is a direct threat, stress, and anxiety. Why is it that the infantry is motivated to go outside the wire and risk encountering traumatic events? Why not remain behind the wire where there are more conveniences and safety? It is all about a heritage; it is all about carrying on the warrior’s tradition, passed down through the ages.

It is the infantryman who encounters the enemy at close range and kills him.
It is the infantryman who must make instantaneous life-or-death choices.
It is the infantryman who chambers a round, kicks down a door, and decides who dies or lives.
And it is the infantryman who watches his fellow troops suffer and die.⁶⁰

For a Marine, it is all about being and living *Semper Fidelis*.^{vi} It is all about *not* maintaining the

^{vi} *Semper Fidelis* distinguishes the Marine Corps bond from any other. It goes beyond teamwork—it is a brotherhood that can always be counted on. Latin for “always faithful,” *Semper Fidelis* became the Marine Corps motto in 1883. It guides Marines to remain faithful to the mission at hand, to each other, to the Corps and to country, no matter what. Becoming a Marine is a transformation that cannot be undone, and *Semper Fidelis* is a permanent

bar at a certain height where just good enough is okay. Rather, it is a spirit and an ethos that embodies the zeal to raise it higher.

How does a Marine keep going when faced with traumatic experiences of combat? GySgt Popaditch is a decorated combat veteran of multiple deployments to Iraq. As a combat veteran, and with his time as a seasoned Drill Instructor, Gunny spoke about the mind-set of a Marine, the warrior's ethos found within the Corps:

...Marine mind-set in action. Mind over matter. Whenever we encounter a physical limit, we push through it and come out the other side, thus discovering capabilities we never knew we had. Positive mental attitude rules in our world. If you cramp upon a PT [physical training] run, you push through it, telling yourself, "It's no big deal. I am not hurt. Keep running."

You do the same in combat saying, "I'm not tired. I can go another six hours. I'm not scared. Move out. Rush, rush!" If somebody asks how you're doing, you say "Good to go" no matter what. We don't even have expression for "So, so," or "Could be better," or any other downside comebacks.⁶¹

These are the words that grip the hearts of Marines whose historic warrior's ethos drives them to go above and beyond to get the job done. Hear again the words, "Good to go," – the conditioned response of a warrior. **Thus is begotten the *unspoken culture of silence*.**

Marine combat veterans know all too well what a deployment into a raging battle can do. War changes people. It is an overwhelming experience of the heart, soul, and mind. The warrior who makes it through war cannot return home as if nothing has happened. Within some, the war still rages and can pour out of them at the most inopportune moments. One combat veteran paints with words what war can do to a person, "War changes you, changes you. Strips you, strips you of all your beliefs, your religion, takes your dignity away, you become an animal."⁶²

It has been said that "one of the most potently toxic experiences in war is the witnessing of human carnage."⁶³ During war "trauma destroys the capacity for social trust, accounting for

reminder of that. Once made, a Marine will forever live by the ethics and values of the Corps.
<http://www.marines.com/history-heritage/principles-values>.

the paranoid state of being that blights the lives of the most severely traumatized combat veterans.”⁶⁴ The antidote from going insane during the unfathomable conditions of war is the bonding taking place amongst comrades on the battlefield. This bonding is described as deep mutual trust and admiration.

Comrades have such attuned feelings of closeness that their bond of trust can only be compared to the bonding that takes place between a husband and wife. This strong bonding takes place with those who go outside the wire where the violence of war looms around every corner. It is in this type of environment that Marines are trusted to have each other’s back. Mutual affection, devotion, and trust intensify this bonding. Loyalty and deep abiding affection saturate the warrior’s mindset, knowing that he is willing to risk even death to protect his comrade.

To lose a brother in arms is painful. For those who do not know how deep the bonding of war can be, envision the pain of losing a parent, spouse, or child. A veteran reveals the following reflection on what it is like to have such strong bonds on the battlefield:

The terror and privation of combat bonds men in a passion of care that the word *brother* only partly captures. Men become mothers to one another in combat. The grief and rage that they experience when the special comrade is killed appear virtually identical to that of a child suddenly orphaned, and they feel that the mother within them has died with the friend.⁶⁵

In modern warfare, especially when the enemy uses guerilla tactics and attacks at night, as was often done in Korea and Vietnam, “there was no safe time to mourn [those killed in battle]. Allowing one’s attention to turn inwards to grief could result in one’s own death and the deaths of others.”⁶⁶ When there is time, Marines will gather to honor those who have died in battle. There is often not a lot of time for this as the fast-paced operations of modern conflict keep pulling the infantry back into the fight.

There is something about war that causes changes within the body and mind. For

instance, “prolonged combat also brings bodily changes that deaden pain, hunger, and desire, resulting in an emotional coldness and indifference.”⁶⁷ These changes can cause certain veterans to respond to combat trauma with hypervigilance. While hypervigilance can attune one’s energy and alertness to a heightened level while at war, this can be problematic when the mind does not disengage back to the pre-combat level when the traumatic events have ended.

The damage of the hidden wound, PTSD, is difficult for the warrior because it is not easily identifiable such as someone on crutches or wearing a cast on their arm. Dr. Farris K. Tuma, chief of the Traumatic Stress Research Program at the National Institute of Mental Health comments:

The disorder can be seen in the example of a service member who returns to the United States after surviving an attack from a roadside bomb hidden in a pile of garbage in Iraq. Even away from the combat zone, a pile of trash along the highway -- what others motorists might consider commonplace -- can trigger a fight-or-flight response in the afflicted troop...With PTSD, there is this stress response system that goes into overdrive in response to things in the environment that it has come to associate with being in danger, and it turns up the heat.⁶⁸

A Marine who has never been to war can comprehend to a certain level the brutality of war, but the reality of being in actual combat is different from pre-combat imagination. During pre-combat training, everything is conducted with a degree of safety. Where is the safety of war? Where are the boundaries? Veterans of war soon learn that the safety lanes of pre-deployment training are nonexistent in warfare. The boundaries of the planned for and the unknown are intermixed, which heightens the alertness of troops going outside the wire.

When a young infantry Marine first experiences the traumatic carnage of war, this can forever change his life due to the *abnormal* conditions of war. It is the “destructive force of war [that] creates an atmosphere of chaos and compels service members to face the terror or unexpected injury, loss, and death.”⁶⁹ The conditions of warfare can cause psychological injury.

The combat environment (austere living conditions, heavy physical demands, sleep deprivation, periods of intense violence followed by unpredictable periods of relative inactivity, separation from loved ones, etc.) is itself a psychological stressor that may precipitate a wide range of emotional distress and/or psychiatric disorders. Psychological injury may occur as a consequence of physical injury, disruptions of the environment, fear, rage, or helplessness produced by combat, or a combination of these factors.⁷⁰

Marines who have never been to war are challenged physically and mentally to adapt to the battle rhythm of combat. Adapting to the climate and terrain is a part of the adjustment. Living in austere conditions is what the infantry has been training for. Combat demands that warriors adapt and overcome; however, during “the first 3 months of an operational deployment is when the majority of stress casualties may occur. . . . It takes time for war fighters to adapt to the hardships and dangers they face day in and day out – to get into the groove of deployment.”⁷¹

One of the looming difficulties of warfare is the *unknown*. It is the unknown that keeps warriors hyper-alert as the enemy is always probing for a weak spot to attack. When the trauma of warfare intrudes upon the warrior, the warrior in turn is challenged to adapt, adjust, and be resilient. These are ideals but not guarantees, as each warrior differs in his ability to respond to the traumas of warfare.

Wound is easier for a warrior to hear than *disorder*. Wounds have long been associated with the nature of war and wounded warriors are traditionally honored. Instead of PTS-*Disorder*, some have suggested that the warrior would find it easier to accept the term *injury*. This term is easier for a warrior to hear because it is commonly accepted that in war injuries take place. Warriors may relate to the concept that a stress injury while in combat is *normal*. By contrast, the word *disorder* evokes a mental construct of being *abnormal*. “Warriors understand that stress injuries, like sports injuries, may be unavoidable, at times – they are just part of the cost of doing what they do. And like sports injuries, most stress injuries heal up quickly, even without professional attention.”⁷²

While it appears to be an issue of semantics, in reality, *disorder* is more than a word; it represents for the warrior a stigmatized sense of being *abnormal*. While American warriors appear to have an aversion to the word disorder, the Canadian military takes a different approach with their warriors and mental health. The “Canadian military has found that applying the term *stress injury* to persistent operational stress problems has helped destigmatize them. *Injury* may also just happen to be the most accurate description of how overwhelming stress affects the mind and brain.”⁷³

A Culture of Life and Death: Lethal Engagements - The Enemy and the Innocent

Sigmund Freud warned us to “never underestimate the power of the need to obey.”⁷⁴ Pre-deployment training and conditioning can indoctrinate a warrior to the necessity of killing while in combat. The necessity of killing is not a spontaneous act of violence that is often portrayed in movies. Marines are skillful warriors required to follow the ROE. Marines are trained in boot camp to be *ethical* warriors. Even with skillful and ethical warriors, however, accidents can still take place during the brutal chaos of infantry combat. What happens to the warrior when the innocent are accidentally killed? What happens when the enemy uses children to carry bombs strapped inside their clothing to approach Marines with the intent of killing all who are nearby? How does a Marine respond to the carnage of war that is not neat and clean but often anathema to his moral and spiritual standards?

While serving as a Navy Psychiatrist, Dr. Nash had significant experiences with military personnel who have served in Afghanistan and Iraq. His experience with these warriors revealed the following insight:

“Among the most potentially traumatic combat events were witnessing the violent death of a buddy or valued leader, being responsible for the death of unarmed children, failing to save a buddy from the death or serious injury, friendly fire, witness atrocities, or surviving in unexpected assault in which many friendly casualties were suffered, such as the vehicle – born IED attack or a large ambush.”⁷⁵

After summarizing the traumatic events of war, Dr. Nash went on to say, “But combat of any kind is potentially toxic.”⁷⁶ *Moral distancing* takes place when warriors need to validate that what they are doing in war is just and legitimate. Grossman states that moral distancing can be divided into two parts. “The first component usually is the determination and condemnation of an enemy’s guilt, which, of course, must be punished or avenged. The other is an affirmation of the legality and legitimacy of one’s own cause.”⁷⁷ Moral distancing can be seen as a mental tool of the warrior where hard choices have to be made. Using moral distancing, a warrior may deem his actions as necessary and virtuous, while the opposing side, the enemy, is depicted as a villain who is immoral and unjust.

In the last hundred years we have moved slightly away from moral affirmation as a justification for starting wars and have focused more on the punishment aspect of moral distance. . . . It is interesting to note that although punishment was used to justify starting American involvement in these wars, moral affirmation came into play later and left a very American flavor to some of these conflicts.

Once the allies began to liberate concentration camps, General Eisenhower began to view World War II as a Crusade, and the justification for the Cold War and the global war on terror had consistent underpinnings as moral battles against totalitarianism, oppression, and terrorism.⁷⁸

Combat veterans have reported seeing the enemy as lower than human while alive, but when killed, they recognize their humanity. Some veterans have never been able to erase the image of the piercing eyes of a dead enemy. The pre-deployment training and conditioning for war reminds the warrior to be ready to kill, but often fails to acknowledge the reality of human death. It is one thing to kill an enemy, and yet some warriors are haunted long after combat by the faces of those whom they have killed. The images of people who died doing something that they believed in stay in their minds’ eye. Right or wrong, they were human beings.

According to Grossman, “looking another human being in the eye, making an independent decision to kill him, and watching as he dies due to your action combine to form one

of the most basic, important, primal, and potentially traumatic occurrences of war.”⁷⁹ Nathan Smith formerly served in the Marines as an infantry officer responsible for the troops under him while serving two combat deployment tours to the Middle East. He states:

Each of us is aware of the importance and influence of a label – our names are precious to us. By labeling an enemy with a derogatory term, infantrymen are able to simultaneously dehumanize him and begin to hate him – not as a human being, but as an object of wrath and the author of his own misery, fear and pain. Dehumanization of the enemy is effective at numbing the conscience and reducing emotional turmoil after a kill, but it also taps into primal areas of hate and rage, which are usually suppressed by the conscience and social conditioning.⁸⁰

Veteran warriors will often wrestle with such issues within themselves, **struggling with the warrior’s code of silence.** Warriors remember well the legendary heroes of the Corps who never had to ask for help. Karl Marlantes, mentioned earlier as a highly decorated infantry combat veteran of the Vietnam conflict, reminds us, “Quitting is unthinkable and pain is just weakness leaving the body.” This is the Marine warrior’s ethos. In this quote two things are noteworthy. Quitting, giving up, or admitting defeat are unthinkable because the Marine’s heritage makes it unthinkable. Secondly, with the words, “weakness leaving the body” he reinforces the idea that Marines are to be strong at all times and never to admit weakness. Could this, in turn, contribute to the problem that many Marines are facing today, that is, admitting the so-called weakness of needing help with PTSD? Is this an example of the *unspoken culture of silence*? There is another part of Marlantes’ story that has not yet been mentioned.

After leaving Vietnam, Marlantes returned to Oxford where he continued his graduate education, earning an MA in philosophy, politics and education. He spent the next 30 years raising a family and working as a business consultant for various international energy companies, while grappling with his memories of the war. In the late 1990s, Marlantes asked the Veterans Administration for help with symptoms caused by post-traumatic stress disorder.⁸¹

Great Marine warriors are also human beings, and therefore not invincible when facing the traumatizing conditions of war. Karl Marlantes struggled for 30 years of his life with PTSD symptoms. If he could do it all over again, would he set aside the perceived stigma of seeking help and readily embrace the

assistance he eventually received?

A Culture of Mixed Emotions: Guilt, Shame, Detached Emotions and Losing a Comrade

Some warriors end up with survivor's guilt when their combat brother is killed and yet somehow they live on. It is this heavy gnawing, questioning time where warriors feel an enormity of guilt because they survived when one of their comrades whom they deemed far superior died. Some warriors may feel that they do not deserve to be alive. For example, a Marine might change vehicles at the last minute at his friend's request, and would later watch that very vehicle explode from an IED.

It is the unknown that harms a warrior's well-being. If we could know where the sniper is ahead of time, if we knew where the IED was planted ahead of time, then we could better respond. But war is not like that. One veteran of Afghanistan said IEDs are the "scariest and nastiest things I have ever seen. They explode out of nowhere and are filled with nails, screws, bolts and whatever else that will tear through body armor and flesh."⁸²

For some warriors, the high that they experience during the fight is intoxicating. Some warriors return back behind the wire to play action-packed video games that keep them highly alert and engaged. This hypervigilance cannot be easily turned off. Living in a prolonged state of hypervigilance can reinforce PTSD symptoms. While helpful during warfare, these hyper-alert symptoms can be damaging once the warrior returns back home.

Dr. Nash states in the book, *Combat Stress Injury* that "Traumatic stress symptoms deserve to be acknowledged and actively managed as soon as possible after they appear."⁸³ What can help a warrior get help with traumatic stress symptoms? Nash believes that "these ethical entanglements may be side-stepped by using the term "traumatic stress injury" for all war

fighters who experienced significant posttraumatic stress symptoms, whether in the first 5 minutes or in the first 5 days.”⁸⁴

How do warriors cope with the stressors of warfare? How do they deal not only with the possibility of their own death but the possibility of failing to keep their fellow Marine alive? How do they maintain their well-being when they lose a brother in arms? Battlefield coping is “not merely to survive a severe stress, but to transcend it through courage, creativity, and growth.”⁸⁵ This is battlefield resiliency. How can the Marines of an infantry Battalion keep engaging with the enemy after losing so many of their fellow comrades? Listening to Marines share their stories of losing their brothers in arms, their answer to dealing with the tragedy was, “We did not have time to grieve.” Their pressing military operational engagement never let up to allow them ample time to grieve.

One might ask, “How can a warrior lose his comrade and keep going forward?” Nash captures a thought for such a time by combining the words of R. S. Lazarus and Viktor Frankl, “Effective coping [on the battlefield] not only manages suffering and adversity but finds meaning in it.”⁸⁶ The ultimate key is finding meaning for the struggle of war. When there is a meaning for the war, a Marine can understand that his fellow Marine did not die in vain. A purpose, a meaning for the war, can give the warrior the resolve to move forward, while never forgetting a fallen comrade. I spoke with a former Marine infantry Corporal, a veteran of two deployments to Afghanistan. He has never failed to remember his two combat brothers who were killed on a holiday. During our interview he shared with me that Mother’s Day was coming. I thought to myself, “Mother’s Day did not even register on my timeline yet because we were still five months out.” But he knew that it was coming, just as he has known for the past nine years. This is the painful anniversary of his two combat brothers’ deaths, one that still prongs his heart,

one that he will never forget.

It has been said that “relationships forged in battle may be the most profound and honest of any that warfighters will ever have in their lives.”⁸⁷ I spoke with a Marine who has been on several deployments and fought in heated battles. He served with Explosive Ordnance Disposal (EOD). With the plentiful use of IEDs by the enemy, his unit was often sent out to clear an area of suspected explosives. This combat Marine veteran shared with me, “Approaching a suspect IED is nerve wracking as you know one false move could be fatal.” He remembers going across a field one day and seeing another Marine step on an IED with a hidden trigger plate and die instantly. His body was ripped in two. He was emotionally spent as there was nothing he could do to save the devastated Marine. When a warrior witnesses a combat brother’s death, he can start to think, “That could have been me,” or even “That should have been me.” The loss of a loved one, a brother killed in combat, often haunts the surviving warrior.

During boot camp, recruits learn the value of being their “brother’s keeper.” They learn repeatedly to take care of their fellow Marines at all times. Then, while out on patrol in a combat zone, an enemy sniper kills a fellow brother in arms. This can cause the duality of remorse on one side and guilt on the other side. It is not uncommon for a Marine to wrestle with many “If I” statements of life: “If I only had,” “If I could have done this or that,”...If, if, if...” The pain of losing someone close and dear as if an actual blood brother is magnified by the feeling that there may have been were something tangible he could have done to save the one killed in battle.

Unlike television or movies where a person is shot and then neatly falls to the ground, war is different. Marines know the agony of watching a fellow Marine die while working desperately to save him. What is it like to be an infantry Marine who loses a combat brother during war? Imagine a scene of desperation with the following fictitious characters: infantry

Marine Lance Corporal (LCpl) Solid does all he can to save his combat brother, only to watch him slip away. The bullets keep coming; the fighting continues. Spin back the clock to the pre-deployment time period. LCpl Ready arrived to the infantry Battalion ended up in LCpl Solid's Company.

LCpl Solid dishes out the usual test, those *new guy* jabs to see how he will respond. A few *new guy* insults are tossed out and LCpl Ready reverses them back with his clever wit. LCpl Solid likes how this LCpl Ready holds up under pressure and gives him his approval. Later on, out on the firing range LCpl Solid finds out that LCpl Ready is *outstanding*. During the six months of pre-deployment training, LCpl Solid is glad that LCpl Ready is assigned to his fire team. As a type of bonding starts taking place, LCpl Solid lowers his protective edge that keeps people at a distance, allowing LCpl Ready a better opportunity to get to know exactly who he really is on and off duty.

Time advances. These Marines are now in country on deployment. Snipers and IED's are a constant threat. Solid is glad that LCpl Ready is on his fire team during recent hostilities and firefights. While out on patrol one night, from out of nowhere a sniper takes out LCpl Ready. He sees him fall and quickly maneuvers over to him. He cannot speak; LCpl Solid is holding him in his arms telling him, "Hang in there, hang in there, don't you die on me." His eyes are glassy; he's losing him. The squad's Navy Corpsman arrives; time is precious. A medevac is called; LCpl Ready's pulse is barely noticeable. This is his fellow Marine, a combat brother, the one that Solid loves as if he were his own flesh and blood, and now in his arms, he slowly dies. The bullets are zipping and popping; combat continues as there is still an enemy to fight.

How can a Marine go through this heart-wrenching ordeal and remain stable-minded? Is it any wonder that infantry Marines come home changed from the experiences of war? The

carnage of war leaves deep wounds, both seen and unseen. These Marines understand the words General Sherman spoke so long ago: “War is hell!”

Culture of Change: War Changes Warriors, Returning Home and Life is Not the Same

I went out and bought a fast motorcycle just to feel that high alertness...I need the adrenaline rush because now [at home] nothing really seems exciting by comparison. There was always a lot of shooting [in Iraq]. When someone shooting at you it definitely gets your attention and you can never get complacent. I'm home now but I'm still afraid to slack off and relax. The bike helps me burn most of it off, but I don't know what to do with it [adrenaline] when I'm not riding.

-A Warrior home from Iraqi Freedom⁸⁸

Coming home from a deployment is often more difficult compared to that of parting to deploy. Returning home has unique challenges for warriors, as they are expected to readily adapt from living in a combat environment to living calmly and at ease on the home front. Warriors often imagine what the day will be like when they redeploy. Sometimes the ideal image of coming home does not always easily align with the reality of the difficulties infantry Marines can experience when they return from combat. For instance, one key challenge is growing back into a strong fully connected relationship with *loved ones*.^{vii}

Those whom the warrior loves dearly will have developed survival strategies of their own, finding routines to help pass the long months of deployment. With the understanding that returning from any deployment can be awkward and challenging for all Marines, I want to focus on the difficulty that infantry Marines with PTSD symptoms have when they come home from war. It is the infantry who regularly *go outside the wire* for extended periods of time which requires them to develop a specific *skill set* for survival. Infantry Marines learn a mode of existing in combat that becomes ingrained regarding how to *act* and *react* to the expected and

^{vii} The words loved ones appearing in this section of the paper will inclusively represent such people as the married warrior's spouse, the fiancée or significant other of single Marines and the warrior's children and all other relatives.

unforeseen conditions of war. For instance, infantry Marines follow measured *orderly steps* for the inspection of their gear – with a visual and mental check-off. If any gear is missing it is easy to identify due to the warrior’s methodical *survival skill set* of keeping everything he needs squared away in an exact location.

This is all about survival. A warrior needs all of his gear in order to be able to protect himself and his comrades. While *outside the wire* a warrior cannot simply pat a pocket and *suddenly remember* that they forgot an important piece of gear. Once outside the wire you either have it – all of your gear – or you do not; there is not any time to run back and grab the missing item off a shelf. When a warrior steps outside the wire, everything he needs for survival should have been methodically checked off as if it were *second nature*.

Having a proficient, orderly wartime system does not easily transfer to the home front. *Loved ones* and friends can have a difficult time understanding why the warrior becomes *extremely hostile* when someone has moved an object out of his orderly system. While most people would think little of having something moved as no *big deal*, this is not so for the warrior. His orderly system originated for *survival*, the necessity of having items in a specific place in preparation for going outside the wire on patrol. His fellow Marines trusted him to be accountable for his gear and to pull his weight if attacked. When a warrior has an *angry outburst* about someone moving his “stuff,” it is linked to his combat experiences and a honed combat skill set that kept him alive.

Coming home can be an unsettling time for warriors. They can easily get angered or frustrated from being around people who have never had to deploy or live on the edge, day in and day out for long spans of time. Sometimes people ask questions that are too personal such as “Did you kill anyone”, as if war was nothing more than a type of video game lacking any real

human emotions or mental anguish.

Coming home is a challenging time for warriors as they are now in contact with loved ones, friends, and the local community residents who do not fully understand where they have been or what they have had to experience: *traumatic events* that have forever changed them. Some loved ones and friends might think after a good night's rest that the warrior will be back to his old self. Warriors have been changed by war, and they are caught between two worlds within their mind and body. One world is the battlefield that still calls out to them to react, relive, and remain in a hyper battle mode. The other world is the home front where the warrior can feel odd, as if something were missing, and is no longer the same. Coming home with symptoms of PTSD is often more difficult than anyone could have imagined, for both the warrior and his loved ones. The warrior's mind and body can still respond to the memories, sights, sounds, and smells of war half a world away.

War reinforces what the Marine already knows, the *boundary lines* of the military. If you cross the line then you are in trouble, and there will be consequences. However, when the warrior comes home, civilians do not have the same boundary lines. In fact, civilians can easily cross all over the instilled military bearing lines again and again, as if it is no big deal. Coming from a structured way of living while in combat to the disorder of civilian life can cause anxiousness and anger for the warrior. A Marine who had been in Iraq put it this way, "Truth is, many Marines are lost when they get home; there is a gap between us and civilians, which is having an effect on each other understanding one another."⁸⁹ How can a warrior come home after living on the edge with the survival demands of combat and then *transform* to living with and around people who lack military bearing? Coming home from war has its challenges.

Why is it that coming home is so difficult for combat warriors? Consider how the combat

warrior's mind and body becomes hyper alert in order to cope with war time experiences. For the infantry in combat, "there is no thought about the future or the past. [They] are completely focused, completely focused on the terrible present moment [all around them]."⁹⁰ Constant hyper-alert checks on people, the landscape, and buildings with the mind focused on the possibility of enemy attack at any time can keep the warrior on edge. While probing their immediate surroundings, warriors are trained to keep a five meter circle around them as a protective measure. Infantry need their protective measures as they move through areas where indigenous people dwell, where the enemy blends in well with the local populace. I spoke with a Marine infantry Gunnery Sergeant who had deployed three times to the Middle East; he shared with me his difficulty in returning home from war.

One of the problems I had with coming home was how easily people attempted to intrude into my personal protective circle of distance. During combat you learn to keep space around you for safety. This is how you survive, by always maintaining a constant vigilance of who was around you, who was approaching you. I always kept a circle of awareness. No one crosses the line of your circle without your awareness and immediate thoughts of safety. You are always thinking surveillance, where are people located, who is moving, where is a possibility of an ambush, where are areas that I can rapidly move to for safety. Hypervigilance keeps you constantly scanning your surroundings. People are not allowed to enter your perimeter of safety. Going outside the wire, I always had on my body armor, and I kept my weapon ready for a quick response if attacked or ambushed.

It was hard to come home from living in a survival mode and then have people intrude upon my personal space that had kept me alive. People wanted to do what was natural for them to do, they would reach out to hug me or touch me. This made my internal body awareness alarm go into full hyper mode. People don't get it; you don't simply step from war to civilization. You cannot unwrap or undo how you have had to live in a combat survival mode. They were not there, they do not understand. Their world for the past six months was nothing like my world. I cannot tell you how uneasy I felt; I knew it was from my experience in combat, but I still could not shut this way of surviving off.

I felt totally insecure, and I started to get an adrenalin dump because I did not have my weapon or body armor. I was extremely uncomfortable. Those items had protected me – my body armor, my weapon – and now I was positioned to be with people [my own family and friends] who intruded into my space of awareness sending me into a hyper-alert mode of thinking that would not disengage. If someone moves quickly I zone in on it. If I heard certain sounds I automatically go back to my survival responses. If anyone came within five meters of my space I went on full alert. Civilians do not understand that you cannot go to war, learn how to survive, and then return home as if your survival way of living has an *on and off switch*.⁹¹

Warriors return to loved ones and close friends who do not know or truly understand the full scope of all that they have been through. When the war is over, the warrior can return home, but his soul may still linger on the battlefield.

What helps a warrior when they return home? "One of the strongest variables that help them in recovery is their level of support from loved ones."⁹² Warriors need someone, a loved one, friend, fellow comrade, or combat veteran of any war that they can trust in order to unpack volumes of emotions, memories, and questions that they hold within themselves. Warriors have a narrative burning within them of where they have been, how they have survived, and the *traumatic experiences* that have honed and shaped who they presently are. They need someone who cares to listen attentively without condescending remarks. They need someone to listen without easy answers to their heart's pain. Often they do not want someone to fix their problems; instead, they long for someone to fully hear what they have been through.

A warrior's story can be filled with painful memories. Loved ones are essential to the warrior's ability to have a healthier return from the war zone to *fully living* back home again. The support of loved ones becomes stepping stones lining the pathway towards healing. When a warrior feels safe and begins to share his narrative, he will soon learn who is able to hear what portions. For instance, a warrior will often tell a fellow combat veteran more aspects of his war experience because he knows that the veteran *understands*.

The warrior will dilute his war experience for nonmilitary family members. Civilians cannot easily understand what takes place in war and for what reasons. To help people understand the dynamics and gruesomeness of war, Karl Marlantes wrote a book utilizing his own combat experience, *What It's Like to Go to War*. In his book, Karl reveals how "the violence of combat assault[s] psyches, confuses ethics, and tests souls."⁹³ Karl's words reveal

how mentally damaged our warriors can be from their *traumatic encounters of war*.

Combat Marines come home from war and often *feel different* while around friends and loved ones. Warriors often hear friends or loved ones tell them, “You have changed.” War does that, it changes the warrior in order for him to survive. Some loved ones do not get it, that is, the change that has taken place in the warrior. Some loved ones might say, “How is it that the things that you used to go and do are now a hindrance?” or “Why can’t you go to the mall anymore, I just do not understand?” A Marine with PTSD looks healthy on the outside, but within, there is this *hidden wound* that if left alone can damage a warrior’s life.

I spoke with a former infantry Marine who came home from a combat deployment to the Middle East with symptoms of PTSD. He shared with me how he would have good days and bad days. On the bad days he could easily get angered and would feel down and out. His wife did not understand the fullness of what it meant for him to have PTSD; she could only notice how much he had changed. The warrior never got help, in an attempt to deny that he had any problems thus perpetuating the *culture of silence*. He shared with me that you just did not do that, admit that you had a problem; you just drove on. His wife was not prepared for him to return home from war so changed. She was not prepared for PTSD and finally admitted that she could not take it and left him, eventually filing for divorce. Warriors come home changed, wounded within from their combat experience, and many find it hard to break the *culture of silence*, admit a weakness, and get help. Life for the warrior with PTSD is no longer the same for himself or his loved ones.

Here is the delicate dilemma for loved ones: they are not fully prepared to understand the breadth and width of PTSD. They often fail to do research; they often fail to get wisdom from a counselor on how to best live with their loved one upon his return, and they fail to attend a seminar on “Returning Warrior’s with PTSD.” This is not an attack on loved ones; let me

continue. The reason that most loved ones fail to be prepared is centered not on themselves, rather, but upon the warrior. It is the warrior who so often *reluctant to admit* that he has an *inner hidden wound*, which he sees as a weakness. The warrior can remain silent because he may fear that his hidden wound could possibly be a career ending injury by being labeled PTSD. So the warrior damaged by the gruesomeness of war remains silent. If loved ones could have known that their warrior was struggling with PTSD, a good many of them would have made the extra effort to read, research, and seek out all wisdom on how to healthily respond to and support their wounded warrior. PTSD is *a wound, a hidden wound.*

Since PTSD is a hidden wound, combat Marines can return home and feel that *all they need is time* and their PTSD symptoms will get better. However, this is not the case with PTSD; time does not heal all wounds. For warriors to step towards healing – admitting their need for help and going to get help – they need to be able to clearly hear about the *PTSD inner wound* from a person that they feel is credible. I asked a former Marine infantry Sergeant, “How can we get Marines to hear the message of PTSD from mental health professionals?” He shared with me that,

“Marines often put up a wall when someone tries to teach them about mental health who has never deployed, or at least served in the military. But, if there is a Marine enlisted leader, a First Sergeant or GySgt who is up front nodding their head in agreement, confirming that the material being taught is valid, then other Marines will usually conclude that they too should listen to what it being taught.”⁹⁴

An Iraq war veteran and mental health professional, Charles Hoge, MD, Colonel, U.S. Army (Retired), has an essential understanding of what it is like to faithfully serve in the military and deploy to war. From 2002 to 2009 Dr. Hoge directed the U.S. military’s premiere research program on the mental health and neurological effects of the wars in Afghanistan and Iraq. This military-seasoned mental health Doctor “gets it” when it comes to a warrior’s difficulty in

transitioning back home from combat.

The desire to shut down, detach, and withdrawal can be very strong after combat. Warriors often want to be left alone. They may avoid going out because it puts them in situations that trigger strong reactions or reminds them of their deployment. Since many little things can cause reactions or lead to confrontations, the natural tendency is to want to avoid going anywhere. They also don't want to explain to people who may not understand why they react the way they do. This can mean not doing a lot of things that the warrior used to enjoy doing, and can be extremely frustrating for loved ones and friends.

Shutting down emotions is a necessary skill in combat, and it can sometimes be very difficult to turn them back on after coming home. Warriors often describe not being able to feel love, not caring about others, and feeling numb or detached. This is also essential for survival in combat. Unfortunately, these problems are the hardest for loved ones to deal with, and the ones that are most likely to end up in failed relationships, breakups, and divorce.⁹⁵

Coming home from war is not an easy overnight adjustment. Warriors "are often surprised at how difficult the transition period is after coming back from a combat deployment. Many expect that they'll just need a little time for things to get back to *normal*, but find that *normal* is elusive and time is relative."⁹⁶ Loved ones notice the difference but do not always understand the cause and effect. An infantry Marine Non Commissioned Officer (NCO) who is currently being treated for PTSD revealed to me the difficulty he had returning home from war.

Returning home from combat I had planned to spend my entire block leave with my family in Ohio. While I was at home my family noticed my social distance. My Mom said that I was there physically, but it was as if I were not there socially. Although I had intended to stay all of my block leave, I could not take it, being around people. I only lasted two days. Inside there was this urge to get away. I ended up driving all the way back to California. How could I be happy around my own family and friends when my fellow comrades did not make it back from war? This ate at me; it just wasn't feeling right within me, so I had to leave and return back to base.⁹⁷

A warrior who has experienced combat trauma cannot easily step from the theater of war back into mainstream society. "The passage of time alone usually does not heal the psychological wounds of [combat] trauma."⁹⁸ This is not a simple process and change is not automatic. Civilians might think that a warrior's adjustment from combat to being home can take place at the *snap of the fingers*, as if to imply that a simple change of mind can fix everything. Some might even say, "Just leave it over there, you are at home now." But warriors cannot

change overnight. This is not a sports bruise where the coach yells out “just shake it off.” There are no *magic switches* which can miraculously turn the war side off so that the non-warrior side of the Marine can now emerge. Coming home from war is not like that.

Coming home from war can be difficult, as the warrior’s normal way of surviving the warfront is not an acceptable way of living once back home. How many friends want to hang out with the warrior who keeps giving them a safety brief with potential threats to watch out for and how to evade if something happens? How many family members will get tired of the warrior who no longer wants to be anywhere where there is going to be a large number of people such as a mall, amusement park, or a sports stadium? How many friends and loved ones would be willing to wait at a restaurant until a table is empty by a wall so that the warrior can feel safe and keep a constant scan on his surroundings?

War changes warriors. While deployed to the theatre of war the Marine wore his body armor and always had his weapon. The Marine’s weapon becomes a vital comfort and can be *somewhat* understood from Charles M. Schulz’s comic strip, *Peanuts*. The primary character in *Peanuts* is Charlie Brown and his best friend is Linus van Pelt. To feel safe in the world around him, Linus always had his blanket, and without the blanket, his world was not the same. A warrior is said to have feelings of safety in the world around him by having his weapon by his side at all times. The warrior’s world is not the same when he returns from war and no longer has his weapon by his side.

When the warrior comes home, his safety is stripped away – no battle armor and no weapon. To feel safe at home, some Marines have weapons staged around their home. One Marine told me that he does in fact have weapons in his home. He has them in different locations but they are unloaded so that he could not pick up his firearm and start shooting while in a

combat dream. One combat Marine Staff NCO expressed to me his need of trying to feel safe, “Every night when the sun goes down, and it is time to turn on the inside lights, I need all the curtains closed. I feel vulnerable with them open, vulnerable to a sniper.” War leaves its imprint upon our combat warriors, one that can leave a *hidden wound* – a wound that is not freely talked about as there is the *culture of silence*.

A large percentage of the wounded warriors that I spoke with from seven States shared with me the difficulties that they have with sleeping through the night. Most could not feel *safe* or *at ease* until they carried out their nightly routine of walking the perimeter of their dwelling place checking the security of windows and doors. As I was interviewing an infantry Staff NCO with PTSD, he shared with me that he has never been able to sleep through the night since returning from his combat deployment. I shared with him how a former infantry NCO with multiple deployments to the Middle East also has nighttime sleep problems. This NCO shared with me there was one way that he could sleep: if a Marine stood the watch over his home. There was a distinct pause...then the Staff NCO *suddenly realized* that the only times he has been able to sleep since coming home from combat was when his present command was out doing field operations! While out in the field, he knew another Marine stood the watch, and this allowed him to sleep. How powerful it is for a Marine warrior to fully trust their well-being to the hands of their fellow Marines. This is a combat tried and tested value, one that recognizes that a Marine will give his all to protect his fellow Marine.

The inability to sleep through the night is hard on the mind and body. Some warriors who have difficulty sleeping try to self-medicate with alcohol. There is a problem in trying to use alcohol as a sleep remedy.

There is an attraction for the warrior to use alcohol. “Its calming effect can seem to help with

sleep and goes together with socializing and partying. However, it's a trap...Over time alcohol actually worsens sleep...Alcohol can cause you to initially fall asleep; right after falling asleep, it reduces the amount of time spent dreaming. For warriors who experience nightmares, this may seem like a good thing. However, within two to four hours (and sometimes after only an hour), alcohol begins to clear out of the body, and the brain tries to "catch up" on the periods of dreaming sleep. This can result in increased dreams and nightmares which may be accompanied by filling revved up and coming out of sleep and waking up. It's common in the second half of the night to toss and turn fitfully or wake up and not be able to fall back asleep.

After drinking alcohol the normal sleep cycles and quality of sleep are disrupted, which results in being much less rested when you wake up. This may lead to the temptation to take a bigger "dose" of alcohol the next night, which would only make things worse. People may not realize that alcohol use, even in the modest amounts, is the most common cause of sleep disturbance. Alcohol also fuels irritability and anger, and worsens the cognitive effects of sleep.⁹⁹

Alcohol may also be used to self-medicate for warriors who have problems with their loved ones. Relationships that were strained before deployment can remain so upon the warrior's return, leading some to consume alcohol to deaden the emotional pain. While deployed, some warriors get a *Dear John* email or letter stating that a relationship is over, and when they return, there is the new stressor of learning how to live alone. Warriors "experiencing problems of early PTSD – anger, withdrawal, disconnection, emotional numbing – are more likely to have trouble holding together their personal relationships. The loss of personal relationships in turn can increase the likelihood that they will experience more severe distress, more anger, and more disconnection."¹⁰⁰

Why are warriors with PTSD symptoms *silent* about their inner turmoil? A better question might be, "Are we ready to fully hear the details of the carnage of war from their lips? Some may refrain from listening to a combat veteran because by "allowing ourselves to hear the combat veteran's story [this then] threatens our culturally defined sense of self-respect."¹⁰¹ Warriors can come home from war and have *hidden wounds* that ooze shame, guilt, anger, and rage. The *hidden wounds* are closed off from inspection.

Warriors often fear that no one, especially civilians, will ever be able to understand what

they have been through. A combat veteran tried to break the *culture of silence* by trying to “talk to people about the war, [and] they would just say to me, “All that’s over now, you should forget it. You survived. Get on with your life.”¹⁰² Combat Marines can come home with the *hidden wounds* because the “instances of PTSD are about twice as high in people engaged in combat than those who deployed but were not involved in direct combat.”¹⁰³ How do we help a warrior understand that it is okay to get help, and in turn, that getting help is not a sign of weakness? This is the question of all questions when dealing with combat Marines and the impact of war.

War causes an emotional collision, where the abnormal demands of combat run headlong into the warrior’s civilized upbringing back on the home front. A warrior “deployed to a war zone is changed by his or her experiences; it would be abnormal not to be. Some reactions may seriously interfere with your life, but that doesn’t mean there’s something wrong with you as a person.”¹⁰⁴ The stressors of combat upon the body and mind can be seen as normal due to the conditions of warfare. According to Dr. Hoge:

PTSD *symptoms* are normal responses to life-threatening situations, such as combat. Every *symptom* of PTSD stems from things your body normally does in response to severe danger or stress. PTSD *symptoms* can be manifestations of normal stress reactions to threatening situations, as well as a disorder that requires treatment. That’s the paradox of it.¹⁰⁵

PTSD symptoms do not go away over time. They are a burden for a warrior to carry and no warrior should bear this burden alone. Getting help is worthwhile as a warrior can acquire *a new skill set* in learning how to best live with the symptoms of PTSD. Getting help not only helps the warrior, it helps his loved ones and friends.

Culture of Reluctance: The Hardest Thing for a Warrior to Do is to Get Help

What is it that keeps our warriors reluctant to go and find help from behavioral health?

Why does the *culture of silence* keep holding our warriors back? Can it be a deep unfounded fear that if one admits that having an *invisible wound within* will somehow cause them to plummet into emotional instability, losing control of their mental capacities? Perhaps a warrior may fear that once the traumatic memories of war are re-experienced, put into words, and unpacked from the numbness, he will not be able to restrain his emotions. Some warriors have lived a long time without ever shedding a tear due to shutting down their emotions while at war. Veterans can be guarded with their emotions and apprehensive regarding what they have had to live through. A warrior may be concerned about *opening up*, fearing that a few tears allowed to escape could turn into a torrid of tears – beyond his ability to control. Warriors may be concerned that admitting that they have a *weakness, a hidden wound*, might cost them their manliness while being around their fellow peers , thus the *culture of silence* grows another root of denial within the warrior.

There is the warrior's ethos, where one is expected to live with a *toughened mindset* like those heroes who have gone before have done. But, because of this ethos of heroic and stoic strength, can it be that admitting *human need* is a sign of *weakness* and becomes a source of shame? Can it be that the hidden shame stemming from the wound within – the one that no one can see with the naked eye – does in fact *silence warriors*? The real tragedy takes place when the warrior does not get help, choosing instead to maintain a *culture of silence*, a smokescreen that covers over his own suffering, not from imagination but from a *legitimate wound*. PTSD is a *hidden wound* that is often misunderstood because the warrior “looks” normal. They may suffer for years (as Karl did for thirty years) before finally acknowledging the extent of their hidden pain.

A former Marine infantry Staff Sergeant who deployed several times to the Middle East

and has been diagnosed with PTSD and Traumatic Brain Injury (TBI) shared with me what took place when he returned from combat. He had a difficult time admitting his *hidden wound* while at home.

I was having a lot of trouble returning from combat with nightmares, night sweats, anger problems, and hypervigilance. I was not the person that I used to be. Simple things would set me off. Finally, my wife had enough and she told me, “You need to get help!” Of course I did the *typical warrior’s response* of being reluctant to admit that I had a problem. Inside of me I felt that asking for help – mental health – would mean that I had a *weakness*. As a Marine, being seen as weak is never good; other Marines might not want me on their team (infantry). I was reluctant to go get help. I felt admitting a *weakness* would ruin my career and cause future job failure.¹⁰⁶

This warrior struggled to honor his family while also honoring what he strongly felt was the warrior’s ethos, *mind over matter*, the fortitude never to reveal or admit a weakness. Loved ones, friends, comrades, and combat veterans can support the warrior with encouragement to get help, not for a weakness, but due to a *legitimate wound* within them. The hardest step towards getting help *is always* the very first step.

When the war is over, some warriors began to think about all that they have been through, and what they did, and then try to make sense of it all. When warriors returning from war are unable “to purge their guilt or be reassured that what they did was right, they turn their emotions inward.”¹⁰⁷ This is where some warriors remain stuck; they are unable to get past their war experiences and the thought of admitting the need for help with their mental health.

For a warrior who does not ever want to present a *weakness*, the idea of going to a mental health professional and admitting their need, sinks to the bottom of their list of things to do. Family members often witness how their loved one returning from war has changed. For some warriors, the thought of having to return fire and kill another person during war weighs heavily upon them, like a rucksack full of stones, and they question themselves inwardly. Reflecting on killing others in combat, they may go through a “series of emotional stages...through a period of

euphoria and elation, which is usually followed by a period of guilt and remorse.”¹⁰⁸

When their tour of duty is over, and they return from a combat deployment, some warriors wrestle with memories of what they have seen and of what they had to do on the spur of the moment. As they reflect on their experiences, a profound level of self-questioning may emerge. While *outside the wire*, on the front lines in a heated moment of battle, returning fire is essential to survival. Commands are given to assault a building or to reclaim a home from insurgents. In close fire fights, warriors will have had to return fire at the enemy to save their own lives, as well as the lives of their fellow Marines. When the time comes to return home with the expectation of leaving such carnage behind, some warriors recognize that what had been essential to their survival can cause conflict on the home front. The traumatic horrors of war are “remembered emotionally.”¹⁰⁹ Dealing with these emotional memories can be overwhelming.

Traumatic memories for a warrior, according to Herman, “lack verbal narrative and context; rather they are encoded in the form of vivid sensations and images.”¹¹⁰ Past traumatic events spill over into unwanted images, sights, sounds and smells. Intrusive traumatic memories of war are painful. The *hidden wound* from the carnage of war is life changing. However, the “stigma” associated with getting help remains. It has been conveyed that “as many as one-fifth of the more than 1.7 million servicemembers who have served in Iraq and Afghanistan reported symptoms of PTSD [and] countering troops’ *aversion to treatment* [the “stigma” of going to mental health] is a chief concern.”¹¹¹ An infantry warrior coming home from war may have a great need for mental health care and yet it remains a huge challenge – self challenge – to reach out for help. Conversely, the opportunity for the warrior to step past the *stigma* of requesting help may actually change the course of his post-war life. Therein lies the tension. He can maintain the typical state of denial from having lived through the trauma of war or take courage

and break through the barrier of his internalized sense of shame over needing help.

Traumatic experiences of war are nothing new. The “Greek historian Herodotus mentioned the *trauma of war* 25 centuries ago in his account of the battle of Marathon. [However], it wasn't until 1980 that American psychiatry formally recognized and named the condition, describing PTSD as *an injury* caused by an outside stimulus rather than by an internal *human weakness*.^{”112} All the warriors before 1980 knew that they were having difficulties with their wartime traumas: haunting images, inability to trust, finding difficulty in trying to sleep, and feeling constantly on edge with hypervigilance. Today these are the known symptoms of PTSD. Nevertheless, some “veterans who suffer from PTSD may believe that they are *weak*. This is a lie,” writes former Marine infantry Captain Nathan Smith. Speaking from his wartime combat experiences in the Middle East, Smith believes that warriors with PTSD are not weaklings.

“The bravest and most competent combat veterans that I know suffer from PTSD. One friend is a Marine officer who was shot through the shoulder by an insurgent sniper during a firefight in Iraq. Picking himself up from the ground and dripping blood onto the radio handset, he calmly called in his own medevac. He was—and is—a tough, personally courageous man.”^{”113}

PTSD is not a sign of weakness; it is a name which refers to a legitimate hidden wound. A solid example of a warrior who denies his struggle with trauma, is this infantry officer who served two combat tours in Iraq as a platoon commander and one combat tour in Afghanistan as a Special Operations augment.

All three tours were highly kinetic and involved up-tempo combat operations. After his third tour, Lt. Col. Grice began experiencing some of the symptoms of PTSD: trouble sleeping, hyper-vigilance, short term memory loss, and reliving traumatic events. A toughened warrior, Grice had trouble admitting that he had PTSD. “I was always of the macho opinion that only losers had PTSD—weak-minded or weak-willed misfits who were too effete to stand up to the rigors of combat,” he writes. “People like that ended up on the side of the road holding up cardboard signs asking for handouts, didn't they?” But he learned that most of them didn't. “Instead, they were just like me—professional warriors who carry the responsibility of leading others into harm's way with the specter of their life-altering experiences constantly looming overhead.”^{”114}

The United States Marine Corps has put out the following statement: “Stigma is the number one enemy of combat/operational stress control. Therefore, it is the duty of every Marine leader, at every level and at all times, to fight stigma — to reduce its interference with stress-injured Marines getting needed help.”¹¹⁵ Fighting stigma begins with understanding its causes, which include:

- Not understanding that stress injuries are like other physical injuries — treatable and not the individual’s fault
- Believing that adverse reactions to stress are a sign of weakness or personal failure
- Not knowing that even the strongest Marine can suffer a stress injury
- Fearing that having an emotional problem or getting help for it will negatively impact their careers
- Fearing that other Marines will think less of them because they got help for a stress injury
- Fearing their peers or leaders won’t trust them as much in future tough situations if they admit to having suffered a stress injury
- Not understanding that the longer they wait to get help for stress injuries that don’t heal quickly on their own, the less likely they are to heal fully
- Not realizing that avoiding getting help may place their unit members at risk because of decreased readiness and performance caused by untreated stress injury symptoms
- Not realizing that avoiding getting help for persistent stress injuries can hurt their careers, relationships, and future health more than accepting help will
- A command climate that discourages getting help or tells Marines to just “suck it up” or “get over it”¹¹⁶

Stigma with mental health and PTSD can be slowly broken when senior enlisted leaders and officers continue to come forward, openly admitting that they too have problems that they cannot fix on their own. The warrior cannot build trust with a mental health worker, according to Herman, until “they are convinced that the therapist can stand to hear the details of the war story.”¹¹⁷ I asked one Marine, a former infantry SSgt who has PTSD, about his experience with a civilian therapist. He did not want to share his war experiences with someone who had never

been to war, who had never worn a uniform. While in the therapist's office, the SSgt kept thinking, "I don't know why I am here, these people are not helping me." He went through four behavioral therapists until finding and remaining with the fifth one.

I asked the SSgt, "What was wrong with your first counselor?" and he responded, "My first counselor started off by asking me about my family tree. I told the counselor, "What the freak do you want to know that for, that is not why I am here" and then I walked out."¹¹⁸ He mentioned how the other three therapists were all into writing in their notes or putting information into the computer. SSgt felt that the therapists did not make him feel that what he had to say was more important than taking notes or staring into the computer. I asked him, "What was different for you after going through four different behavioral therapists; what happened with number five that made you feel connected?" SSgt did not miss a beat with his answer:

This one, the fifth one, we clicked. From the very first moment we met he never wrote anything down. Instead he looked at me with every word that we spoke. He wasn't asking me questions with his head focused on writing something in a folder, instead he made me feel important, he cared to see and hear what I had to say. This therapist made me feel that he was there for me and me alone.¹¹⁹

I reflected what I heard from SSgt, "The fifth therapist gave you solid eye contact and showed that he cared to hear about your life. Was there anything else that this counselor did or said that was different from the other therapists?" SSgt gave a quick – Yes – then added,

This counselor's first words caught my attention. He told me, "I don't know what you are going through; I have never been in the military, and I have never faced a trauma." I liked how this therapist was open with me at the very start. It was important to me how he honestly opened up to let me know he did not know *what I was going through* because he had never been in the military or faced a trauma. That clears the floor; he is no longer someone who thinks that they know all about me because of some book that they read. This person was for real in that he did not know about war, *but* he cared about me and was willing to listen, to hear my story.¹²⁰

Every Marine I spoke to that has PTSD and has been sent to see a mental health therapist

did not like the fact that the therapist was a civilian with no military experience. Warriors prefer to identify their war stories with other warriors because they know the language; they know about the long nights that seem never to end, to be in a firefight or to feel the unnerving sense of being on edge when moving outside the wire.

A Marine Gunnery Sergeant (GySgt) who is a combat veteran with multiple deployments to the Middle East shared with me how his father had fought in the Vietnam War. All through his years, from a child to a young adult, he had never heard his father say anything about his wartime experiences in Vietnam. When GySgt returned from his first combat experience, his father was there to greet him and welcome him home. Something happened. When he came home from war, his father started to open up about his own war experiences. His dad began to share memories from war because now he had solace with a fellow combat veteran. A new conversation could take place because both of them understood the intensity of battle, the traumatic images of war, and spoke a common language full of emotion as they allowed their memories to flow out into words. Perhaps the reason his father finally opened up might have to do with the fact *he felt safe, safe* in knowing that his son was *better* postured to hear his traumatic memories. The son and father were both warriors and therefore had the ability to understand how one has to act and react in a split second. They also had the unspoken understanding *not to judge* the other because he was not there. GySgt and his dad had a sense of belonging and safety with each other where it was okay to tell the story of war, one warrior to another.

Civilian therapists, according to the veterans I spoke with, are not trusted because they do not know; that is, they have not actually experienced anything about living and surviving through the horrors of war. Since there are not enough military therapists to meet the growing need of

veterans with PTSD, how then can a civilian therapist best help warriors? Civilian mental health can best help the warriors by granting them a *safe area* to disclose their inner struggles.

Feeling safe is crucial, as is *hearing* they are not the only ones with PTSD. In her book, *Common Shock: Witnessing Violence Every Day*, Kathae Weingarten called *safety* “a fundamental human need.”¹²¹ Safety is in the environment where counseling takes place. Safety is feeling that it is okay to open up with someone that you can trust. Safety appears in the body language from the therapist to the patient – one that shows “I am ready to listen, and you are my number one priority.” It is reflected in the facial expression and tone of voice. A feeling of *being safe* takes time to grow as does building the *bridge of trust* between the counselor and warrior. Feeling rushed to get all of his struggles out at once can send the warrior into a defensive mode, one that makes him reluctant to share. To help warriors feel safe, therapists can offer the warrior *empathy*, which can be understood as “feeling what someone else feels.”¹²²

A civilian therapist can best help the warrior also by “confronting his/her own sadistic feelings, not in response to the patient, but in terms of his/her own potential as well.”¹²³ In other words, what Judith Herman is suggesting is for the therapist to realize that he or she could have done the same thing given the same conditions of stress and trauma. This is a starting point to engage warriors struggling with PTSD. It is important to recognize that “since trust is not present at the outset of treatment, both therapist and patient should be prepared for repeated testing, disruption, and rebuilding of the therapeutic relationship.”¹²⁴

At first, the warrior may attend therapy due to his command’s directive or a loved one putting down her foot and drawing the line – so as to say, “Either you go for help or I am leaving!” Usually the warrior who is mandated to go for help is reluctant. For instance, he will only answer questions from the mental health therapist with as few words as possible.

Sometimes he can grow into perceiving that he is getting helpful input, which in turn can help lessen the edge of being in therapy. When this happens the warrior's protective barrier begins to be lowered, if not completely removed. He becomes a bit more accommodating in building a relationship with his therapist.

In 2008, an Army survey presented to former Defense Secretary Robert Gates, revealed "nearly half the soldiers polled believed they *would be seen as weak* if they sought treatment for their *invisible injuries*. While the overall Army attitude has become more accepting of mental health care recently, the Defense Department's effort to remove the *stigma* is an attempt at remolding a deeply entrenched aspect of military culture."¹²⁵ Dr. Hoge wrote about stigma of getting mental health care within the military culture -- "Massive education campaigns and an emphasis by military leaders at the highest levels to reduce *the stigma* haven't made a dent in the problem."¹²⁶

A seasoned combat war veteran learned the hard way how to get help with PTSD. After war he decided to keep the *culture of silence* without getting any help with PTSD. This warrior, a First Sergeant, was difficult to live with and at times, to be around. He finally gave in after several failed marriages and went for help. This warrior had to choose to either continue living as he had, with complications at work and with loved ones, or to lay aside the *culture of silence*, move past the "stigma", and go to mental health and get help. This was a long drawn-out struggle that cost him the ability to fully enjoy life around him. He went for help, and in due time, found what he was missing: a sense of enjoyment for living, having the ability to be humorous again, and being able to spend quality time with his loved ones. This warrior offers words of wisdom for his fellow warriors.

The single best piece of advice that I can give to any warrior who feels alone, angry, detached, or afraid of crowds, suffers from lack of sleep, dislikes loud noises, or is just not feeling right, is to

talk, talk, talk about how you feel with someone you feel safe with. Understanding why you react to situations will set you free and allow you to begin healing. Start by committing, forgiving yourself, and loving yourself – and later on you can work on finding some of those same feelings for the rest of the human race. When I learned that my reflex actions are directly the result of combat experience and training, I began to see myself as a normal person.¹²⁷

A Culture of Silence – Strong but Not Impenetrable

Navy Chaplains serving with the Marines are called on to be strong, strong in the sense of appearing to have it all together in spirit, mind, and body in order to be *a steady presence of hope* in supporting our troops. Chaplains have a *culture of silence* as they are called to be trusted with confessions of the heart from those they serve.

Chaplains have a unique role in that they are most frequently sought out, among all the military professional disciplines, by those personnel struggling with emotional difficulties. As is the case in the general population with clergy, more military personnel with mental health problems seek out chaplains for help than seek out mental health providers. Chaplains are viewed as “safe” listeners, because communication directed toward chaplains can be held confidential and does not have to be reported up the chain of command as those in other disciplines are required to do. Chaplains’ styles of ministry also may make them more readily available. In addition to formal availability through worship services, funerals, hospital work, and counseling, chaplains frequently provide an informal “ministry of presence” by spending time at base camps in informal settings interacting with those they meet.¹²⁸

Chaplains are a valuable time-tested resource, spiritual warriors who provide forthright support for those going through emotional, physical, and spiritual issues. I interviewed a Chaplain who deployed twice to Iraq with Marine infantry. His battalion lost a lot of Marines. He himself was awarded the Purple Heart for wounds sustained in combat. The following interview illustrates how a Chaplain can feel when called upon to be strong, the *go to* person when traumatic events take place within a command in a war zone, and yet finds out that he is not immune to the *stressors of war*. There is evidence that “war zone trauma may affect chaplains in ways similar to other soldiers, including spiritual tension, loss of faith, and PTSD.”¹²⁹

Eight years after separating from the Marine Corps as a Staff Sergeant, Chaplain X^{viii} graduated from the Naval Chaplaincy School. Due to an urgent billet that needed filling and his prior Marine background, he received orders to an Infantry Battalion and arrived ten days before deploying to Iraq. He checked in to his new command on a Friday, and the following Monday he held a memorial service for two Marines who had died during their pre-deployment leave. The following Friday Chaplain X deployed to Iraq with warriors who did not know him at all.

On the second day in Iraq, Chaplain X's command suffered its first casualty of war. This was a tough deployment where 23 Marines and Navy Corpsmen of his battalion (BN) were killed along with 40 from the task force. His BN also had 400 Marines wounded while deployed. This was his first deployment as a Navy Chaplain, and it was difficult. After being in country for four months, Chaplain X had been out on patrol with his Marines and had made his rounds, spending several days at every Forward Operating Base (FOB) within his BN. One day while on patrol with Golf Company, he was riding in a seven-ton vehicle that was struck by an IED made from howitzer shells. The road was supposed to have been swept clean earlier but somehow the enemy had been able to embed two large bombs. Wearing his personal protective equipment (PPE) saved him from the damaging upward-thrusting detonation. After the explosion, Chaplain X suffered a concussion which caused him to feel dazed and not fully coherent for fleeting moments after the blast. While trying to realize what had just taken place, he found blood coming from his ear. He discovered that his eardrum was blown, and after removing his PPE vest, he cried out in pain, as his ribs were painfully dislocated.

Looking back on his first deployment, Chaplain X admits that he witnessed a lot of trauma. I asked him, "You arrived to your command in the last days before deployment. Once in

^{viii} The Navy Chaplain who went through two deployments to Iraq and suffered the loss of so many of his fellow Marines will remain unidentified and simply referred to as Chaplain X.

Iraq you put great effort in getting around to all of your Marines, which is why you were in the seven-ton, going on another patrol. After getting to know so many of your Marines, how did you as a Chaplain, a fellow comrade, and a normal human being deal with losing so many members of your command?" Thinking for a moment, Chaplain X shared his thoughts with me:

Joining the command at the last moment before deployment, no one knew me. I put a lot of effort to getting out my Marines and their corpsman to build relationships. When I would get notified that one or more had been killed, it was hard on me. It was hard as a chaplain, a comrade, and normal human being to lose a fellow Marine.

I was dealing with the same questions that they were dealing with, "Why are we here?" At times I would think, "This is not fair; this is just not fair", when another one of my Marines died. I was tired of losing a comrade and asked myself, "What is the purpose?" These are the thoughts that flowed through my heart and soul just as it did my fellow Marines. These were not my daily thoughts, but when a fellow brother is killed, one *questions all things* trying to make sense of life. Every time that I got a notification of death I had to reevaluate, "Was what we are doing worth that person's life?" To me, personally, that dead Marine was not just a number, he was a person, a person that I spent time with, a fellow warrior. And then I would also have morbid thoughts, "What if that was me?"

The Marine Corps allows a moment for grief, but then you shut it down; you have to in order to move forward. You have to put it away—grief—because you have to back out. The enemy is still out there; we have to fight.

My Commanding Officer (CO) would send me out to each and every area that had lost a Marine. I did all of the memorial services for the 23 Marines and corpsmen who died while we were in Iraq. Being *present and visible* in the area where a Marine had been killed, I would offer the memorial service. I would also feel their pain and grieve with them. By building relationships, by getting out to my people, they trusted me with a double trust. First, they trusted me as a chaplain and secondly, as a former Marine. After the memorial service I was able to offer pastoral counseling for grieving Marines. Since they had a double trust with me, a lot came and opened up to me, not for spiritual reasons, but because they knew with my Marine background that I would *get it*, that is, what they were going through. For most of my time in the Marine Corps I was not a Christian, so *I get it* about trusting another Marine, especially if that former Marine is now a chaplain.¹³⁰

While on his second deployment another traumatizing event took place. Chaplain X had made a good friend with another "Mustang," (former enlisted Marine who became an officer) who was the Company Commander for Fox Company. This friend had arranged for a strategic local leadership council meeting. The BN CO, the Sergeant Major (SgtMaj), Fox Company CO, and Chaplain X were all supposed attend the council meeting. The BN CO then redirected the

Chaplain to attend another meeting on his behalf in a different location. During the council meeting, an insurgent used a suicide vest that exploded, killing a multitude of people including the BN CO, Fox Company CO, and a Corporal (CPL) on his third tour; and critically wounded the SgtMaj. The entire BN's morale was low from losing their fellow comrades. Chaplain X remembers the events as follows.

This was tough, really tough. I have often thought that if the BN CO had not redirected me to attend another meeting, I too would be among the dead. How do you reconcile that? You're lucky to be alive, but at what cost? Am I supposed to be happy to be alive while my fellow comrades lay dead? The command moved forward, the Executive Officer fleeted up to take over command. We held a memorial service to honor their lives, but this was a difficult time for all of us.

As soon as the memorial service was over, I saw a Marine bringing me an American Red Cross Message (AMCROSS). This is pretty common for me to get an AMCROSS message, it usually lets me know that someone's family member had surgery, a baby was born, or someone's family member was very ill or had died. I ask the CPL, "Who is this AMCROSS for?" and he responded, "It is for you." This caught me off guard; it was an unforeseen surprise. Apparently my Dad passed away in his sleep. I knew he had medical problems, but I never thought he would die.

This was a tough, tough, time. I needed to be with my troops and help the command recapture our bearing and move forward with the absence of three great leaders and a faithful CPL. And, at the same time, I also needed to be with my family. My command sent me on emergency leave, and it was such horrible timing. It took me a week to get out of country and then fly to Texas. I remember being in a deep fog. I could not think straight. I was existing, but it was mechanical; I was just going through the motions. My wife flew out to Texas to join me for a couple of days. It was great to see her, but I was an emotional zero at this time. I offered the eulogy at my father's funeral with little if any emotions.

Leaving Texas, it took me another week to get back into Iraq and back out to my troops. When I returned it had been three weeks since the memorial service. Inside of me, I was flat; it is like having a body that functions but there is no heart. I did my job as a chaplain but I was numb. Since arriving at the battalion I had held memorials for over 29 fellow comrades, and it took its toll on me. Inside, I was burnt out, empty, and depleted. I remained this way through the entire rest of the deployment. I would just do services and get out to my troops, but I was just going through the motions. Inside of me, I was flat and empty.¹³¹

Chaplains are human too; we are called to be strong for our people but we are not

impenetrable. We, too, can have intense emotions and feel deeply distraught. Our ministerial calling is to give of ourselves as we embrace those who need to share their *troubles* or ask those “*why*” questions of life.

There can be occasions while deployed to a remote area where there is no one available with whom Chaplains feel safe to unload all that we have taken in. There can also be times when a Chaplain might not want to unload his burdens because it might make him look *weak* and *vulnerable* in front of his peers. It is not a *weakness* for a Chaplain to get help when the *stressors of war* fall, even upon the *divinely called*. It is beneficial for a Chaplain to find a fellow Chaplain outside of his chain of command, someone who knows what it is like to wear his shoes, who can be trusted, in order to safely share the inner anguish from what we have witnessed. We are to remember our ministerial calling to *serve* but also need to realize that we too need help; we need care for the caregiver. Deborah van Deusen Hunsinger writes about the challenge for those in ministry who bear the pain of those that they serve.

The challenge for those in ministry is that we internalize certain levels of pain by virtue of our commitment to be fully present with the handful of persons we serve on a daily basis. The cumulative effect of being in the presence of so much pain puts us in danger of *compassion fatigue*, in which we simply reach our limits. We stop caring, not because we want to, but because we no longer have the capacity to take in anything more.¹³²

As a person of faith who often hears and takes in the despair of others, we cannot simply go to another Marine or Sailor within the command and unload. When we keep the despair of others inside, over a period of time it accumulates and can damage us. It is like carrying a bucket full of toxins where the label reads, “Can be hazardous if it touches your skin, and it is illegal to discard.” You do your best to walk around safely with all the toxins inside your bucket, but it becomes heavier as more and more is put inside. Eventually, no matter how hard you try, there is a great probability of getting some toxins on you. When it happens, it eats at you, slowly

numbing you. This is what it is like for a Chaplain never to unload his life's burdens. While deployed and working through the stressors of war, Chaplain X noticed that no Marine or Sailor ever asked him, "*How are you doing?*" That is, how are you doing at a deeper level of existing through the carnage of war?

How are you doing? This is a question, in my experience, that needs to be asked twice. The first time I ask a Marine *how they are doing* I will get the message that they think I want to hear. We all do that, right? Someone asks us the question, "How are you doing" as a social courtesy as they pass on by, and we often respond "great" and they say "great" and we keep going. Most people do not want to hear how you are *really* doing; they expect for you to say, "I am okay," so that they in turn can say, "Good" and keep moving down the corridor of life. This becomes a part of life for a lot of people, asking questions as a form of greeting, not for genuine inquiry.

I have learned as a chaplain to ask the question, "How are you doing?" twice. I know the first answer is superficial, where I am told *what they think* that *I want to hear*. Then, I use my full posture to show that I really care about what I am asking, my eyes are locked in on their eyes, I move closer to let them know that this is not just a passing gesture, but a sincere, "I care about how you are doing in all areas of your life, and there is no other person more important than you at this time." Using this approach I have found a lot of Marines will open up to me when *they realize that I really care to hear* about how they are doing, and it is not just a superficial comment so that I can go make out a report.

It is a part of who we are as Chaplains, to be available to all of our Marines, Sailors, and those who are attached to our command from a different branch of service, to risk opening our heart to allow their grief and pain to come our way. Building relationships allows warriors the

ability to seek out their Chaplain concerning answers to the “why questions” of life. Inner questions can guide a Marine to see his Chaplain: questions of life, questions of meaning, questions that seek to know the purpose of all that the warrior has been through. Navy Chaplains are called upon to be visible to their Marines and Sailors, to walk the spaces, get out to their combat Marines by living the *ministry of presence*. When Chaplains are out interacting with their Marines, this affords the opportunity for Marines who may never step into a Chaplain’s office to ask *heart-felt questions*. While spending quality time with those Marines in the FOB, trust is built, and more often than not you hear, “Chaps, you got a minute?” The word Chaps is usually used when relationships have begun, and trust is being built. Chaplain is more formal. “Chaps” is how the warriors usually respond to their Chaplain. Marine Commanders often like to call their Catholic and Christian chaplains by the title, *Padre*. It is all about building relationships by being visible, accessible, and reliable.

In building relationships, Chaplains are called to give of themselves. We are called to listen, clearly to hear what our fellow warrior is saying, or is unable to say since words cannot always be found to express what lies within his *heart and soul*. Some warriors will have *moral wounds* as they remember and regret their actions during war, or their failure to act, or guilt for not having reacted with more proficiency to save someone’s life.

Conversations about moral injury requires deep listening. In being open, we must be willing to take in what we hear as part of ourselves, to be moved, even by what is difficult or painful to hear, and to struggle to understand profound questions about *moral conscience*. Hearing *soul-bearing truth* requires resiliency to accept the worst things human beings inflict upon each other, to be present to anguish, and to let what we hear sink into us without judgment. Deep listening requires us to set our own needs aside, and to offer, simply, respect. For we reach and change others, and we ourselves are changed when we plunge to the depths of our inner life, those depths that often lie beyond articulation.¹³³

Chaplains are called to hear those questions of life flowing from a warrior’s moral wound or wound of the soul. War changes warriors; they will never be the same. The actions that take

place in war can cause “questions” that betray troubling thoughts of regret or shame. Chaplains desire to maintain a strength from within, renewing their walk of faith through sacred texts and prayer in order better to support their Marines. The strongest and most gifted Chaplain is still a human being, and human beings are not immune to the stressors of war.

The prophetic witness and action to which we are called as Christians [as well as spiritual leaders of faith groups outside of Christianity] cannot endure without a willingness to suffer with those who suffer. Yet we cannot do this work with a glad heart unless we know how to drink regularly from the wellspring of God’s compassion for all people. Those of us who work as pastors, counselors or human helpers know that mourning is itself the work of healing. Active, fully engaged mourning, crying out in lament to God, is precisely what enables us to keep our hearts open in troubled times because we thereby open ourselves to the immeasurable compassion of God for each vulnerable, human heart.¹³⁴

As Chaplains, we are willing to grieve and mourn with our fellow Marines and Sailors. It is not something that we have to do; rather, it is something that we *are*. And when we feel as if we are running dry, we must drink again from the wellspring of God’s compassion for all people. We cannot give away what we do not have within. We are called to be with our people, to fully listen, hear their sorrows or questions of life, to keep their confidence, and also to find a place of refuge for our own inner cleansing, to keep ourselves healthy in spirit, mind, and body.

A Culture to Build

Communities can have warriors living among them and still not understand their *hidden inner wounds*. Within the local community, warriors appear strong, filled with courage and valor and yet, the wound that would be easily cared for – responded to with compassion – remains *hidden, silent*, and oozing with pain. If the warrior were missing a limb or wearing a cast on his leg, the local community could identify the injury and embrace the warrior. But PTSD is a *hidden internal wound*, a wound that leaves the exterior looking healthy. People might not understand it, but “emotional pain can hurt just as much and be just as physical pain.”¹³⁵ War

changes people. A former Marine who served with the infantry for two combat tours to Afghanistan revealed to me during an interview how difficult it is to have PTSD, a *hidden wound* that civilians cannot see or understand.

People don't get it when it comes to PTSD. This is not an injury you can see. They don't get it that a person with PTSD is reliving boot camp in their brain. If I could take a picture of my brain and show how it makes me feel every day, trapped in resentment, guilt, pain; maybe then people could see how damaging my wound is. There are days I feel really good and then the other days I am just crashing. I have a wound inside my head, and it is not healed. What really bothers me is that people don't look at PTSD as a big injury because we don't have a missing arm or damaged leg, and yet, I too am wounded.¹³⁶

How can society at large and the local community in general best help our warriors from wars past, present, and future? Is there a healthier way to help warriors maneuver through a *culture of silence*, strengthening them to set aside any and all stigmas so they can move toward experiencing the healing they so rightfully deserve? One suggestion is found in *Fields of Combat, Understanding PTSD Among Veterans of Iraq and Afghanistan*, where the author Finely proposes "...reframing the military's cultural emphasis on toughness and stamina in different terms—replacing an ethos of grin and bear it with one aimed at maintaining optimal fitness over time—such efforts will be better equipped to counteract existing stigma, while encouraging service members to seek care before problems spin out of control."¹³⁷ Regarding this suggestion, one must remember the military culture did not happen overnight, and it cannot be changed overnight. That being said, it will take time for any changes to be approved and implemented.

While changing the military culture would take a considerable amount of time, how can we help our warriors with the *hidden wounds* of war *NOW*? Warriors suffering in silence need a community. A great resource for warrior support may be found within local religious communities. The authors of *When They Come Home: Posttraumatic Stress, Moral Injury, and*

Spiritual Consequences for Veterans offer four key suggestions on how religious communities can best support warriors.

1. Increase personal contact with veterans. Many veterans struggling with spiritual questions may not directly seek support. Increased contact will provide more opportunities for healing conversations to begin.
2. Instruct colleagues, parishes, and veteran families about the consequences of trauma in war and help to open up dialogue across groups.
3. Be aware of the variety of related family stresses, including the potential for family violence and harmful substance abuse. Continue to inquire, check-in, and follow-up with veterans and their families as to how things are going and help facilitate needed supports.
4. Help provide non-judgmental healing environments with strong social support for veterans and an affirming, welcoming community of faith. Consider worship and other liturgical elements that acknowledge and celebrate veterans' service, their safe return, and sacrifice made by veterans and their families.¹³⁸

How many people within local religious communities understand how difficult it is for a warrior with a *hidden wound* to return from war? Their body is still wired for war. Some warriors may have *moral struggles* that can cause spiritual complications. Religious leaders can help by understanding that “many veterans do not believe their *moral struggles* are psychological illnesses needing treatment. Instead, they experience their feelings as a *profound spiritual crisis* that has changed them, perhaps beyond repair.”¹³⁹ A religious leader can support and hear about the warrior’s pain which springs from what he holds deeply as a *violated moral issue*. Coming home from war can be very difficult. It is hard both for the warrior and his loved ones. Religious leaders and their communities can create meaningful dialogues of care and support. Warriors with inner wounds are often silent about their pain. This is where healthy conversations build trust and allow the opportunity for the warrior and his loved ones to step towards an embracing and affirming community.

While “religious communities can be healthy, supportive options … engagement with any community that fosters healthy living can be very useful.”¹⁴⁰ When the community joins

together, a better umbrella of support is offered both the warrior and his loved ones. A good example of supporting a warrior returning from war is portrayed by traditional tribal people “who realized that an entire society is afflicted by war and must participate in its warrior’s healing.”¹⁴¹ There is a lot to learn from how traditional cultures brought home their warriors.

They offered a purification ceremony where the young warriors “were tended only by older warriors, so that they had the benefit of their elders’ experience to facilitate their transition back into civilian life. This is not to say that warriors and traditional cultures did not have what we now call PTSD. The rituals around the condition did help to minimize its effects and lead to recovery. The condition was treated as a *communal* rather than an *individual* problem, and those who suffered from it were not pathologized.”¹⁴²

This stands in stark contrast to American culture at large. Our culture focuses on getting our warriors prepared for war with the investment of training and preparation for the development of muscle memory along with a toughened mindset. But we do not invest with the same amount of time and energy to prepare our warriors for a healthy return. Warriors “take their energies and emotions of war directly back into ordinary life with neither cleansing nor transition.”¹⁴³

I interviewed Riccardo Sheppard, who spent nine years of his life with the Marines, five of those years with the infantry, 3rd Battalion, 6th Marines out of Camp Lejeune. He deployed to *Operation Just Cause* in Panama and spent a lot of time with his fellow infantrymen doing patrols. In his heart, he would never have left the Corps, but to please his wife, he processed out in 1993. Currently he is working on a Master of Divinity at Princeton Theological Seminary, seeking ordination as an Episcopal Priest. He has been an active member of the Marine Corps League for a long time.

Riccardo carries within his heart a sense of the *community at large*, reaching out to our warriors wherever he goes. He shared with me a creative community outreach he was able to institute aimed at helping our warriors returning from war and veterans of all wars. While at the Westchester County Veterans Administration (VA) mental health facility located in Montrose,

New York, he kept hearing about the rising suicide rate for veterans.

I wanted to do something to stop this rising trend. While doing some volunteer work at the VA, I was conversing with a counselor who was concerned about the rising rate of suicide among veterans. He was searching for different ways of helping veterans learn about the suicide prevention program they have at the VA. The problem is communication. How can we reach veterans who do not have computers or who do not read the paper?

One evening I was sitting at a bar talking with a Marine and the bartender on the topic of the rising number of suicides among veterans. The bartender spoke up and told me that he sees a lot of the military who get back from combat deployment. They start drinking and opening up about war experiences or troubles with being back at home and the bartender said that he would just nod to show he was listening. Although he did not understand all that they had been through, he did listen, allowing them to continue sharing their story.

That is when a thought came to me. I asked the bartender if he would be willing to get some training so that he could understand the *signs of suicide and PTSD*? He shook his head yes. I continued to think. If the bartender had knowledge from a training program and a *suicide hotline number*, then he would be well suited to get a veteran presenting suicidal ideation help. I asked him would he be willing to attend a training course in order to help our veterans, and he said, “Yes.”

A friend of mine went with me to the VA where we presented our plan and asked for a counselor to conduct a training program for bartenders. The VA gave us full support. The easy part was getting VA to come on board; the hard part was in getting the owners of the bars to pay their bartenders for attending the *two hour* training program.

We pushed the issue, knowing that a better number of local bartenders would attend if they could get paid, and of course, some would have come regardless of pay. The owners agreed to pay, and we set up the training that included 12 bartenders from five different bars.

We had a VA counselor who provided training that was geared directly towards bartenders. During the first part of his training the counselor explained what PTSD is with signs and symptoms. The second part is where the counselor engaged them on what to do if someone at the bar *appears suicidal* by the way that they are speaking (e.g. I wish I had a gun, life does not seem worth living, people would be better off without me, life is too painful to keep going, etc.). The bartenders were given a number to a “hotline” where they could help a suicidal veteran speak to a counselor. Often times it is having someone who can talk to the person in their language, acknowledge their pain, and feel their loss. This is a critical moment in their life where they feel that dying is a better alternative than living, and I wanted to put out *safety barriers* to keep them alive. This was a grass roots strategy of placing helping hands in areas where veterans might go to “medicate” their misery.¹⁴⁴

Riccardo invested his time and effort to create a program for the good of returning warriors and veterans of all wars. This is an example of how “the community” can hear about a need and seek measures to bring forth helpful alternatives. One person is limited in what they can accomplish,

but a community effort can offer a broad umbrella of support. When Riccardo was in Panama, he learned to sleep with his rifle between his legs as a safety measure. That was his comfort when he would try to rest between patrols out in the jungle. There was something that he and his infantrymen did while deployed to Panama that he hopes to modify and use helping out Marines on active duty, in the Reserves, those who have retired, and those who no longer serve but who will always be Marines.

If we can get our younger Marines to sit around the table with Marines of different wars who are older for a time of sharing our stories, hearing each other's difficulty and those moments of success, this can be a therapeutic time. Marines value one another and we are good at sharing our stories with one another because *we know that they know* what we are talking about. We can share stories on those areas of life when we have had those lessons learned experiences. This is not the setting for those one-up stories, where I went through more and had greater difficulties than another veteran. No, no, no. This should be a time of *heart to heart* sharing where everyone is on the same level without any power struggles. I don't want this in a VA or a medical setting; this needs to take place where anyone going in does not get labeled.

We need to find a way to get our Marines around the table. After our missions in Panama we went to an area where we could decompress around a table and share the stressful experiences we had while out on patrol. When we gathered around the table we would let it out. Today our Marines are coming home, and they are carrying things inside. It is all about coming together in groups, telling our stories to fellow warriors who understand because they have been there.

When we have the setting to where it is okay and safe to tell our stories, this allows us to *take it off our shoulders*, like you would do a heavy rucksack, and *put it on the table*. When you put it on the table everyone has a chance to look at it, feel where you are coming from, and it does not seem so heavy anymore. It is no longer you carrying it alone; rather, now the weight is being carried by everyone around the table.

We have to figure out ways to get Marines around the table where they can take it off and unpack what is in it. If not, those who carry those burdensome rucksacks of war memories or difficulties while at home will find it getting heavier and heavier. Then when the rucksack of painful memories and problems adjusting to being home gets too heavy, those who will feel it will be our families, those we love, and those we may never know. Around the table it is safe to share your story with other warriors, to lift off that heavy rucksack of experiences, memories, and troubles, to a community who well know where you are coming from, who care to listen, and who will validate that you are not alone. Marines never let other Marines down, and Marines will always be Marines for life.¹⁴⁵

Having Marines at the round table can be very beneficial. It is important for all warriors to be able to share their war stories and have those who hear them understand "they were at war"

in uncivilized conditions where split-second reactions meant the difference between living or dying.

Veterans most often withhold their stories, not only because of the pain evoked in telling them but also because they fear that, in our culture of denial, we won't properly receive them. And without telling their stories, veterans cannot truly become warriors. Instead, they become stuck in the role of scapegoat, carriers of the tribal shadow. If we are to redress this situation, we have a profound responsibility to be a supportive audience for those who went to war in our name.¹⁴⁶

To hear the story of the warrior is to open oneself to his journey, through his painful moments – those nights that seemed to never end where he stood between life and death – to hear his inner wounds, all while building a bridge of communal trust. The good part of the round table that Riccardo envisions is that the table is surrounded by Marines who can and will help other Marines. But, the down side is that such a close-knit brotherhood of trust can alienate warriors from the community around them. “Storytelling at its most effective must go beyond the therapeutic setting and an exclusively veteran audience to take place before members of the general populace.”¹⁴⁷

Since the beginning of history, narration (or storytelling) has been one of the most important rituals after returning from war, in ancient war stories – and ancient war – such as the story of Achilles – are still relevant today... Probably the most important thing that narration does is allow you to express your emotions and feelings into words... In order to even acknowledge our deepest feelings, we need to know that there is someone who cares and who is willing to listen without judgment as we struggle to express ourselves... There is something very healing and being able to put our experiences, thoughts, emotions, and feelings into words... Various studies have shown that the single most important component of therapy for PTSD and many other health problems is having the opportunity to speak with someone who is concerned, caring, and empathetic.¹⁴⁸

Marines need other Marines, but they also need the support of the local community. “Research conducted since the 1980’s has consistently shown that social support is an important piece of understanding warrior’s vulnerability to PTSD. Higher levels of social support – that nebulous term that describes having people to turn to for practical and emotional help and encouragement – have been found to mediate the effects of combat exposure and to predict lower

susceptibility to PTSD and greater resilience to stress.”¹⁴⁹

Conclusion

Marines go through boot camp and acquire a toughened mindset and a rich understanding of Marine Corps history. In the infantry battalion, Marines learn again and again to maintain a toughened mindset and uphold the ethos of the Corps. Going to war does not cause all warriors to have inner hidden wounds, but war does change all warriors. For some, but not all, warriors who do go to war and directly encounter or witness traumatic experiences while *outside the wire*, combat leaves a lasting *hidden inner wound*, PTSD.

Marine infantry culture appears to have an unspoken message of never showing *weakness*, which has kept some Marines from going to mental health professionals for help. The former infantry Marines with whom I have spoken and who are now injured with PTSD admit that they, too, used to look down on anyone who said that they had PTSD. A common response from their former days was the remark “You suck as a Marine” to those who claimed to have PTSD. Today, the wounded Marines that I have spoken with feel like “I suck” because they now have the wound, the one that they used to ardently condemn.

A former Marine SSgt shared with me how hard it was for him to finally get help as his command sent him to the Wounded Warriors Battalion (WWB).

The day I arrived, I broke down in tears because I knew this was it; I would be forfeiting what I have always loved to do, be a Marine and serve in the infantry. I just knew when I would step through the doors of WWB that I would be turning my back and walking away from what I love, being a Marine. I had fought going to get help, making all the excuses of how things would get better, but this was it; I no longer had the option. I knew I needed help but *to know* and *to do* are two separate things. Finally, my command saw that this is where I needed to be. This is not how I ever thought my career with the Marines would end up; this is not what I had in mind when I first enlisted, so the day I arrived at WWB was the hardest day in my life.¹⁵⁰

Most of the wounded infantry that I interviewed all admitted how hard it was to ask for help.

Individually they expressed that they did not like having to go to a civilian therapist and have to, as they say, “spill their guts.” Several of the wounded Marines found that their relationship with God has helped them with their PTSD, not necessarily a cure, but a catalyst for better progression; one that is sustained by hope and grace.

One wounded Marine did not recognize any symptoms until after his third deployment. He had just gotten married and moved into his new home with his beautiful bride.

My thoughts suddenly went back to my good friend who was killed in Fallujah. I was suddenly feeling overwhelmed and just broke down. I kept thinking, “How could I enjoy a marriage and fresh start on life when my friend will never be able to have the same opportunity?” All of his dreams of a happy future ended in Fallujah. This came from out of nowhere and caught me totally unprepared. It hit me like a ton of bricks, and I just broke down, with all the memories flowing through my mind right in front of my new bride.

A large percentage of the wounded Marines that I interviewed have had trouble with anger and sleeping through the night. One still refuses to drive at night; another refuses to sit inside a room full of people unless he can pick where he wants to sit: with his back to a wall with a clear view of who is coming, going, and moving around him. One Marine goes out of his way in order not to use the same road going from point A to point B because of his experience in the Middle East with IEDs. Several Marines have weapons hidden around their homes for safety. One Marine will never sit by a window because this is a great target for a sniper.

Most every Marine I interviewed has had problems adjusting when they came home from war. Some had difficulties that ended their marriage. Others went for help at the last possible moment in order to save their marriage and to learn again how to be a better husband and father by working on anger issues. They had difficulty transitioning from combat survival to living back on the home front.

A culture of silence for Marines is unspoken, and yet it runs strong. It is not printed on an official document; it is not spelled out as a standard operating procedure for boot camp, but it

finds its way into the hearts and minds of combat Marines. Some have told me it has to be this way: they must be seen as strong and not weak. One wounded Marine I interviewed told me that you need to have confidence in your fellow infantryman to be both mentally and physically up to the task, as that was the Marine you trusted with your own life. A former infantry Sergeant understands how the infantry can have an unspoken disdain for perceived weakness:

As a Marine, failure is not an option and *weakness* is not an option. So, to admit that you are *weak* – and that is how it is seen – then that means you have failed. A Marine is not going to admit weakness; he is going to fight through it and do everything he can do to stand up and complete the mission. It is not a written policy, but it is something you know in the infantry, “You don’t show weakness.”¹⁵¹

Another wounded Marine remembers boot camp and his time in the infantry where the focus, from his point of view, was to always look and sound strong. Marines are not called to be weak, but strong.

When we get to the fleet, to our unit, we are looked upon to have certain skills and a will to learn. It is a dog eat dog world in the infantry, and we figuratively eat our own; we are very hard on each other. I don’t think it will ever change. If you talk to any other infantry Marines, I bet they will say the same things. It almost has to be that way to maintain an effective force.

If you are on a sports team, professionally, and you know that you have a lot of injuries, how much confidence does that give you that you are going to win? Knowing that [players with injuries handicap the team’s ability to fully play] would give you lower confidence in your ability to win. Are you going to try hard knowing you are going to lose? It can also affect the confidence of the unit as a whole, knowing that they have a bunch of injured people that they are working with. How effective can they really be?¹⁵²

Those are the words of an injured Marine who had the opportunity, with his high scores, to have his pick where he could serve. He chose the infantry. While in Iraq he said that he was not curled up in a little ball trying to hide; he was out kicking in doors and being a warrior. And now, he is a wounded warrior with PTSD. I asked him, “What would you tell other Marines who have PTSD symptoms and who continue the *culture of silence* by not getting help?”

PTSD does not get better over time. It just gets worse. If you keep putting dirt on it you only get a bigger dirt pile; it does not go away. For Marines struggling to admit PTSD, don’t be afraid to

reach out. It can happen to anyone; it is not a death sentence. Just like a sprained ankle needs attention and you get help, take the same mindset towards getting help with PTSD. It is a wound that needs attention.¹⁵³

With every Marine that I interviewed my last question would be, “One last thought, from all that you have been through and since you have been diagnosed with PTSD, what would you recommend to another Marine suffering PTSD symptoms but who maintains a *culture of silence*? ” Most looked back on how they used to make belittling remarks towards a Marine in their unit who *claimed* to have PTSD to their present reality of now living with PTSD. Almost everyone admitted that if they had to do it all over again, they would not delay in getting help, but, at the same time, admitted that it would still be difficult. One wounded Marine had the following suggestion: “I now know what it is really like to have PTSD and get help. I have learned that there is no shame in getting help. Marines need to talk about it, and they should never try to keep it all bottled up inside, because it can hurt them later on.”¹⁵⁴

One final thought...The one thing I heard again and again from the Marines wounded with PTSD – some with both PTSD compounded by Traumatic Brain Injury –...the central theme I heard from these Marines on individual interviews was as follows, “I would not take back my experiences, serving my country, and being a Marine. I really miss being a Marine and being around Marines. A Marine *will always be* a Marine for life.” That lifelong commitment to the strength and brotherhood of the Corps should now include a fearless rejection of a dysfunctional *Culture of Silence*.

Bibliography

Allen, Jon G. *Coping with Trauma : Hope through Understanding*. 2nd ed. Washington, DC: American Psychiatric Pub., 2005.

"Bill Moyer Interviewed Karl Marlantes on Television Concerning His Book, *What It Is Like to Go to War.*". In *Moyers & Company* 52:43, 2012.

Brock, Rita Nakashima, and Gabriella Lettini. *Soul Repair : Recovering from Moral Injury after War.* Boston: Beacon Press, 2012.

Cantrell, Bridget C., and Chuck Dean. *Down Range : To Iraq and Back.* 1st ed. Seattle, WA: WordSmith Publishing, 2005.

Chaplain, US Navy. ""Interview for Chaplain Todd's Thesis, "Good to Go!": Marines, Combat and the Culture of Silence."." 2014.

Drescher, Kent D.; Foy, David W. "When They Come Home: Posttraumatic Stress, Moral Injury, and Spiritual Consequences for Veterans.". *Reflective Practice: Formation and Supervision in Ministry* 28 (2012).

Figley, Charles R., and William P. Nash. *Combat Stress Injury : Theory, Research, and Management.* Routledge Psychosocial Stress Series. New York: Routledge, 2007.

Finley, Erin P. *Fields of Combat : Understanding Ptsd among Veterans of Iraq and Afghanistan. The Culture and Politics of Health Care Work.* Ithaca: ILR Press, 2011.

Former Corporal I, Marine Infantry. "Interview for Chaplain Todd's Thesis: "Good to Go!":Marines, Combat, and a Culture of Silence." 2014.

Former Marine Infantry Sergeant, Riccardo Sheppard. "Interview for Chaplain Todd's Thesis, "Good to Go!: Marines, Combat and the Culture of Silence."." 2014.

Former Staff Sergeant II, Marine Infantry. "Interview for Chaplain Todd's Thesis: "Good to Go!": Marines, Combat and the Culture of Silence." 2014.

Grossman, Dave. *On Killing : The Psychological Cost of Learning to Kill in War and Society.* Rev. ed. New York: Little, Brown and Co., 2009.

Gunnery Sergeant (1), Marine Infantry "Interview for Chaplain Todd's Thesis: "Good to Go!: Marines, Combat, and the Culture of Silence."." 2014.

Herman, Judith Lewis. *Trauma and Recovery.* Rev. ed. New York: Basic Books, 1997.

Hoge, Charles W. *Once a Warrior, Always a Warrior : Navigating the Transition from Combat to Home--Including Combat Stress, Ptsd, and Mtbi.* Guilford, Conn.: GPP Life, 2010.

Hoge M.D., Charles. *Once a Warrior Always a Warrior: Navigating the Transition from Combat to Home, Including Combat Stress, Ptsd, and Mtbi.* Guilford, Connecticut: GPP Life, 2010.

Hunsinger, Deborah Van Deusen. "Keeping an Open Heart in Troubled Times: Self-Empathy as a Christian Spiritual Practice." Chap. 13 In *A Spiritual Life: Perspectives from Poets,*

Prophets, and Preachers, edited by Allen Hugh Cole, 123-34. Louisville, Ky.: Westminster John Knox Press, 2011.

Kruzel, John J. "Healing the Invisible Wounds of War, Military Chiefs - Shrinking the Stigma." *American Forces Press Service* no. U.S. Department of Defense (2008). Published electronically November 26, 2008.
http://www.defense.gov/home/features/2008/1108_ptsd/stigma1.html.

Kruzel, John J. . "Diagnosis Ptsd - Symptoms, Prevalence." (2008). Published electronically November 25, 2008.
http://www.defense.gov/home/features/2008/1108_ptsd/diagnosis1.html.

Lawhorne Scott, Cheryl, Don Philpott, and Government Institutes. *Combat-Related Traumatic Brain Injury and Ptsd : A Resource and Recovery Guide*. Military Life. Lanham: Government Institutes, 2010.

Marine Infantry, Former Corporal III. "Interview for Chaplain Todd's Thesis: *"Good to Go!: Marines, Combat, and the Culture of Silence"*." 2014.

"Marines the Few. The Proud.". <http://www.marines.com/home>.

Mockenhaupt, Brian. "A State of Military Mind." (2012). Published electronically June 18, 2012. <http://www.psmag.com/navigation/health-and-behavior/a-state-military-mind-42839/>.

Molinanavarro, Interview with Marine Staff Sergeant Agustin. ""Good to Go!": Marines, Combat, and a Culture of Silence." 2013.

Perry, Tony. "Mock Afghan Village at Camp Pendleton Aims to Prepare Troops for Combat." (2010). Published electronically November 16, 2010.
<http://latimesblogs.latimes.com/lanow/2010/11/my-entry.html>.

Popaditch, Nick, and Michael Steere. *Once a Marine : An Iraq War Tank Commander's Inspirational Memoir of Combat, Courage, and Recovery*. 1st ed. New York: Savas Beatie, 2008.

Powers, Rod. "The Few, the Proud...The Marines." About.com,
<http://usmilitary.about.com/od/marines/l/aamarines.htm>.

Rothschild, Babette. *The Body Remembers : The Psychophysiology of Trauma and Trauma Treatment*. New York: Norton, 2000.

Sergeant II, Marine Infantry. "Interview for Chaplain Todd's Thesis: *"Good to Go!" : Marines, Combat and the Culture of Silence"*.", 2014.

Shay, Jonathon. *Achilles in Vietnam Combat Trauma and the Undoing of Character*. New York: Scribner, 1994.

Smith, Nate. "Combat Loss and Ptsd, When the War Continues." <http://thesoldiersload.com/>.

———. "A Legion of Shadows." <http://thesoldiersload.com/2012/03/06/a-legion-of-shadows/>.

Smith, Nathan. "Explaining the Inexplicable." <http://thesoldiersload.com/2012/01/16/explaining-the-inexplicable/>.

Smith, Stephen Smith and Nate. "Combat Loss and Ptsd."

<http://thesoldiersload.com/2012/12/08/combat-loss-and-ptsd-part-1-post-9-11-casualties/>.

Thomas, Claude Anshin. *At Hell's Gate : A Soldier's Journey from War to Peace*. [Expanded pbk. ed. Boston, MA: Shambhala, 2006.

Tick, Edward. *War and the Soul : Healing Our Nation's Veterans from Post-Traumatic Stress Disorder*. 1st Quest ed. Wheaton, Ill.: Quest Books, 2005.

Traina, Cristina L. H. "Captivating Illusions: Sexual Abuse and the Ordering of Love." *Journal of the Society of Christians* 28, no. 1 (2008): 183-208.

Weingarten, Kathy. *Common Shock : Witnessing Violence Every Day*. New York: Dutton, 2003.

Werbel, CDR Tom Gaskin and LCDR Aaron. "Why Marines May Not Seek Help." United States Marine Corps, <http://www.usmc-mccs.org/leadersguide/deployments/combatopsstress/generalinfo.cfm>.

Wilson, Patricia. "Understanding Military Culture When Treating Ptsd." *PTSD: National Center for PTSD, PTSD 101 Course* (2009): 1-12.
http://www.ptsd.va.gov/professional/continuing_ed/military_culture.asp.

Wood, David. "Iraq, Afghanistan War Veterans Struggle with Combat Trauma." (2012). Published electronically July 4, 2012. http://www.huffingtonpost.com/2012/07/04/iraq-afghanistan-war-veterans-combat-trauma_n_1645701.html?view=print&comm_ref=false.

Notes

¹ Charles R. Figley and William P. Nash, *Combat Stress Injury : Theory, Research, and Management*, Routledge Psychosocial Stress Series (New York: Routledge, 2007), 51.

² Judith Lewis Herman, *Trauma and Recovery*, Rev. ed. (New York: Basic Books, 1997), 34.

³ Patricia Wilson, "Understanding Military Culture When Treating Ptsd," *PTSD: National Center for PTSD, PTSD 101 Course*(2009), http://www.ptsd.va.gov/professional/continuing_ed/military_culture.asp.

⁴ Erin P. Finley, *Fields of Combat : Understanding Ptsd among Veterans of Iraq and Afghanistan*, The Culture and Politics of Health Care Work (Ithaca: ILR Press, 2011), 2.

⁵ Edward Tick, *War and the Soul : Healing Our Nation's Veterans from Post-Traumatic Stress Disorder*, 1st Quest

ed. (Wheaton, Ill.: Quest Books, 2005), 54.

⁶ Finley, *Fields of Combat : Understanding Ptsd among Veterans of Iraq and Afghanistan*, 107.

⁷ Nick Popaditch and Michael Steere, *Once a Marine : An Iraq War Tank Commander's Inspirational Memoir of Combat, Courage, and Recovery*, 1st ed. (New York: Savas Beatie, 2008), 15.

⁸ Interview with Marine Staff Sergeant Agustin Molinanavarro, "'Good to Go!': Marines, Combat, and a Culture of Silence" (2013).

⁹ Figley and Nash, *Combat Stress Injury : Theory, Research, and Management*, 42.

¹⁰ Ibid., 46.

¹¹ Rod Powers, "The Few, the Proud...The Marines," About.com, <http://usmilitary.about.com/od/marines/l/aamarines.htm>.

¹² Ibid.

¹³ "Marines the Few. The Proud.," <http://www.marines.com/home>.

¹⁴ Ibid.

¹⁵ Ibid.

¹⁶ Ibid.

¹⁷ Dave Grossman, *On Killing : The Psychological Cost of Learning to Kill in War and Society*, Rev. ed. (New York: Little, Brown and Co., 2009), 321.

¹⁸ Ibid., 327.

¹⁹ Ibid.

²⁰ "Marines the Few. The Proud.".

²¹ Ibid.

²² Tick, *War and the Soul : Healing Our Nation's Veterans from Post-Traumatic Stress Disorder*, 54.

²³ Popaditch and Steere, *Once a Marine : An Iraq War Tank Commander's Inspirational Memoir of Combat, Courage, and Recovery*, 48.

²⁴ Figley and Nash, *Combat Stress Injury : Theory, Research, and Management*, 42.

²⁵ Babette Rothschild, *The Body Remembers : The Psychophysiology of Trauma and Trauma Treatment* (New York: Norton, 2000), 24.

²⁶ Tick, *War and the Soul : Healing Our Nation's Veterans from Post-Traumatic Stress Disorder*, 92.

²⁷ Cristina L. H. Traina, "Captivating Illusions: Sexual Abuse and the Ordering of Love," *Journal of the Society of Christians* 28, no. 1 (2008): 183.

²⁸ Ibid., 200.

²⁹ Jon G. Allen, *Coping with Trauma : Hope through Understanding*, 2nd ed. (Washington, DC: American Psychiatric Pub., 2005), 26.

³⁰ Ibid., 27.

³¹ Kathy Weingarten, *Common Shock : Witnessing Violence Every Day* (New York: Dutton, 2003), 104.

³² Herman, *Trauma and Recovery*, 51.

³³ Allen, *Coping with Trauma : Hope through Understanding*, 35.

³⁴ Figley and Nash, *Combat Stress Injury : Theory, Research, and Management*, 97.

³⁵ Finley, *Fields of Combat : Understanding Ptsd among Veterans of Iraq and Afghanistan*, 68.

³⁶ Ibid., 69.

³⁷ Ibid., 62.

³⁸ Ibid., 67.

³⁹ "Marines the Few. The Proud."

⁴⁰ Cheryl Lawhorne Scott, Don Philpott, and Government Institutes., *Combat-Related Traumatic Brain Injury and Ptsd : A Resource and Recovery Guide*, Military Life (Lanham: Government Institutes, 2010), 8.

⁴¹ Marine Infantry Former Corporal I, "Interview for Chaplain Todd's Thesis: "Good to Go!":Marines, Combat, and a Culture of Silence" (2014).

⁴² Ibid.

⁴³ Nathan Smith, "Explaining the Inexplicable," <http://thesoldiersload.com/2012/01/16/explaining-the-inexplicable/>.

⁴⁴ Brian Mockenhaupt, "A State of Military Mind," (2012), <http://www.psmag.com/navigation/health-and-behavior/a-state-military-mind-42839/>.

⁴⁵ Tony Perry, "Mock Afghan Village at Camp Pendleton Aims to Prepare Troops for Combat," (2010), <http://latimesblogs.latimes.com/lanow/2010/11/my-entry.html>.

⁴⁶ Mockenhaupt, "A State of Military Mind".

⁴⁷ Stephen Smith and Nate Smith, "Combat Loss and Ptsd," <http://thesoldiersload.com/2012/12/08/combat-loss-and-ptsd-part-1-post-9-11-casualties/>.

⁴⁸ Mockenhaupt, "A State of Military Mind".

⁴⁹ Perry, "Mock Afghan Village at Camp Pendleton Aims to Prepare Troops for Combat".

⁵⁰ Karl Marlantes, *What It Is Like to Go to War* (Groves Press; Reprint Edition 2012), 11.

⁵¹ Ibid.,16.

⁵² Smith, "Combat Loss and Ptsd".

⁵³ Tick, *War and the Soul : Healing Our Nation's Veterans from Post-Traumatic Stress Disorder*.

⁵⁴ Grossman, *On Killing : The Psychological Cost of Learning to Kill in War and Society*, 78.

⁵⁵ Ibid., 86.

⁵⁶ Ibid., 254.

⁵⁷ Ibid.

⁵⁸ Mockenhaupt, "A State of Military Mind".

⁵⁹ Finley, *Fields of Combat : Understanding Ptsd among Veterans of Iraq and Afghanistan*, 67.

⁶⁰ Smith, "Combat Loss and Ptsd".

⁶¹ Popaditch and Steere, *Once a Marine : An Iraq War Tank Commander's Inspirational Memoir of Combat, Courage, and Recovery*, 59.

⁶² Jonathon Shay, *Achilles in Vietnam Combat Trauma and the Undoing of Character* (New York: Scribner, 1994).

⁶³ Figley and Nash, *Combat Stress Injury : Theory, Research, and Management*, 27.

⁶⁴ Shay, *Achilles in Vietnam Combat Trauma and the Undoing of Character*.

⁶⁵ Ibid., 49.

⁶⁶ Ibid., 59.

⁶⁷ Ibid., 92.

⁶⁸ John J. Kruzel, "Diagnosis Ptsd - Symptoms, Prevalence," (2008), http://www.defense.gov/home/features/2008/1108_ptsd/diagnosis1.html.

⁶⁹ Lawhorne Scott, Philpott, and Government Institutes., *Combat-Related Traumatic Brain Injury and Ptsd : A Resource and Recovery Guide*, 12.

⁷⁰ Ibid.

⁷¹ Figley and Nash, *Combat Stress Injury : Theory, Research, and Management*, 48.

⁷² Ibid., 49.

⁷³ Ibid., 50.

⁷⁴ Grossman, *On Killing : The Psychological Cost of Learning to Kill in War and Society*.

⁷⁵ Figley and Nash, *Combat Stress Injury : Theory, Research, and Management*, 51.

⁷⁶ Ibid.

⁷⁷ Grossman, *On Killing : The Psychological Cost of Learning to Kill in War and Society*, 164-65.

⁷⁸ Ibid., 167.

⁷⁹ Ibid., 31.

⁸⁰ Smith, "Explaining the Inexplicable".

⁸¹ "Bill Moyer Interviewed Karl Marlantes on Television Concerning His Book, *What It Is Like to Go to War.*," in *Moyers & Company* (52:432012).

⁸² Bridget C. Cantrell and Chuck Dean, *Down Range : To Iraq and Back*, 1st ed. (Seattle, WA: WordSmith Publishing, 2005), 20-21.

⁸³ Figley and Nash, *Combat Stress Injury : Theory, Research, and Management*, 52.

⁸⁴ Ibid., 51-52.

⁸⁵ Ibid., 43.

⁸⁶ Ibid.

⁸⁷ Ibid.

⁸⁸ Cantrell and Dean, *Down Range : To Iraq and Back*, 31.

⁸⁹ Charles W. Hoge, *Once a Warrior, Always a Warrior : Navigating the Transition from Combat to Home--Including Combat Stress, Ptsd, and Mtbi* (Guilford, Conn.: GPP Life, 2010), xv.

⁹⁰ "Bill Moyer Interviewed Karl Marlantes on Television Concerning His Book, *What It Is Like to Go to War..*"

⁹¹ Marine Infantry Gunnery Sergeant (1), "Interview for Chaplain Todd's Thesis: "Good to Go!: Marines, Combat, and the Culture of Silence."" (2014).

⁹² Hoge, *Once a Warrior, Always a Warrior : Navigating the Transition from Combat to Home--Including Combat Stress, Ptsd, and Mtbi*, 28.

⁹³ "Bill Moyer Interviewed Karl Marlantes on Television Concerning His Book, *What It Is Like to Go to War..*"

⁹⁴ Riccardo Sheppard Former Marine Infantry Sergeant, "Interview for Chaplain Todd's Thesis, "Good to Go!: Marines, Combat and the Culture of Silence."'" (2014).

⁹⁵ Hoge, *Once a Warrior, Always a Warrior : Navigating the Transition from Combat to Home--Including Combat Stress, Ptsd, and Mtbi*, 32.

⁹⁶ Ibid., xviii.

⁹⁷ Marine Infantry Sergeant II, "Interview for Chaplain Todd's Thesis: "Good to Go!"': *Marines, Combat and the Culture of Silence.*" (2014).

⁹⁸ Cantrell and Dean, *Down Range : To Iraq and Back*, 36.

⁹⁹ Hoge, *Once a Warrior, Always a Warrior : Navigating the Transition from Combat to Home--Including Combat Stress, Ptsd, and Mtbi*, 80-81.

¹⁰⁰ Finley, *Fields of Combat : Understanding Ptsd among Veterans of Iraq and Afghanistan*, 71.

¹⁰¹ Shay, *Achilles in Vietnam Combat Trauma and the Undoing of Character*, 32.

¹⁰² Claude Anshin Thomas, *At Hell's Gate : A Soldier's Journey from War to Peace*, [Expanded pbk. ed. (Boston, MA: Shambhala, 2006), 28.

¹⁰³ John J. Kruzel, "Healing the Invisible Wounds of War, Military Chiefs - Shrinking the Stigma," *American Forces Press Service*, no. U.S. Department of Defense (2008),
http://www.defense.gov/home/features/2008/1108_ptsd/stigma1.html.

¹⁰⁴ Hoge, *Once a Warrior, Always a Warrior : Navigating the Transition from Combat to Home--Including Combat Stress, Ptsd, and Mtbi*.

¹⁰⁵ Ibid., 11.

¹⁰⁶ Marine Infantry Former Staff Sergeant II, "Interview for Chaplain Todd's Thesis: "Good to Go!": Marines, Combat and the Culture of Silence" (2014).

¹⁰⁷ Grossman, *On Killing : The Psychological Cost of Learning to Kill in War and Society*, 275.

¹⁰⁸ Ibid., 111-12.

¹⁰⁹ Allen, *Coping with Trauma : Hope through Understanding*.

¹¹⁰ Herman, *Trauma and Recovery*, 38.

¹¹¹ Kruzel, "Healing the Invisible Wounds of War, Military Chiefs - Shrinking the Stigma".

¹¹² David Wood, "Iraq, Afghanistan War Veterans Struggle with Combat Trauma," (2012),
http://www.huffingtonpost.com/2012/07/04/iraq-afghanistan-war-veterans-combat-trauma_n_1645701.html?view=print&comm_ref=false.

¹¹³ Nate Smith, "A Legion of Shadows," <http://thesoldiersload.com/2012/03/06/a-legion-of-shadows/>.

¹¹⁴ "Combat Loss and Ptsd, When the War Continues," <http://thesoldiersload.com/>.

¹¹⁵ CDR Tom Gaskin and LCDR Aaron Werbel, "Why Marines May Not Seek Help," United States Marine Corps,
<http://www.usmc-mccs.org/leadersguide/deployments/combatopsstress/generalinfo.cfm>.

¹¹⁶ Ibid.

¹¹⁷ Herman, *Trauma and Recovery*, 222.

¹¹⁸ Former Staff Sergeant II, "Interview for Chaplain Todd's Thesis: "Good to Go!": Marines, Combat and the Culture of Silence."

¹¹⁹ Ibid.

¹²⁰ Ibid.

¹²¹ Weingarten, *Common Shock : Witnessing Violence Every Day*, 116.

¹²² Ibid., 166.

¹²³ Herman, *Trauma and Recovery*, 144.

¹²⁴ Ibid., 148.

¹²⁵ Kruzel, "Healing the Invisible Wounds of War, Military Chiefs - Shrinking the Stigma".

¹²⁶ Hoge, *Once a Warrior, Always a Warrior : Navigating the Transition from Combat to Home--Including Combat Stress, Ptsd, and Mtbi*, 174.

¹²⁷ Charles Hoge M.D., *Once a Warrior Always a Warrior: Navigating the Transition from Combat to Home, Including Combat Stress, Ptsd, and Mtbi* (Guilford, Connecticut: GPP Life, 2010), 85.

¹²⁸ Kent D.; Foy Drescher, David W., "When They Come Home: Posttraumatic Stress, Moral Injury, and Spiritual Consequences for Veterans.,," *Reflective Practice: Formation and Supervision in Ministry* 28(2012): 95.

¹²⁹ Ibid.

¹³⁰ US Navy Chaplain, ""Interview for Chaplain Todd's Thesis, "Good to Go!": Marines, Combat and the Culture of Silence."'" (2014).

¹³¹ Ibid.

¹³² Deborah Van Deusen Hunsinger, "Keeping an Open Heart in Troubled Times: Self-Empathy as a Christian Spiritual Practice," in *A Spiritual Life: Perspectives from Poets, Prophets, and Preachers*, ed. Allen Hugh Cole (Louisville, Ky.: Westminster John Knox Press, 2011), 123-24.

¹³³ Rita Nakashima Brock and Gabriella Lettini, *Soul Repair : Recovering from Moral Injury after War* (Boston: Beacon Press, 2012), 90.

¹³⁴ Hunsinger, "Keeping an Open Heart in Troubled Times: Self-Empathy as a Christian Spiritual Practice," 134.

¹³⁵ Hoge, *Once a Warrior, Always a Warrior : Navigating the Transition from Combat to Home--Including Combat Stress, Ptsd, and Mtbi*, 220.

¹³⁶ Former Corporal I, "Interview for Chaplain Todd's Thesis: "Good to Go!" :Marines, Combat, and a Culture of Silence."

¹³⁷ Finley, *Fields of Combat : Understanding Ptsd among Veterans of Iraq and Afghanistan*, 173.

¹³⁸ Drescher, "When They Come Home: Posttraumatic Stress, Moral Injury, and Spiritual Consequences for Veterans.,," 100.

¹³⁹ Brock and Lettini, *Soul Repair : Recovering from Moral Injury after War*, 51.

¹⁴⁰ Drescher, "When They Come Home: Posttraumatic Stress, Moral Injury, and Spiritual Consequences for Veterans.,," 97-98.

¹⁴¹ Tick, *War and the Soul : Healing Our Nation's Veterans from Post-Traumatic Stress Disorder*, 209.

¹⁴² Ibid., 210.

¹⁴³ Ibid., 212.

¹⁴⁴ Former Marine Infantry Sergeant, "Interview for Chaplain Todd's Thesis, "Good to Go!: Marines, Combat and the Culture of Silence."'"

¹⁴⁵ Ibid.

¹⁴⁶ Tick, *War and the Soul : Healing Our Nation's Veterans from Post-Traumatic Stress Disorder*, 220.

¹⁴⁷ Ibid., 222.

¹⁴⁸ Hoge, *Once a Warrior, Always a Warrior : Navigating the Transition from Combat to Home--Including Combat Stress, Ptsd, and Mtbi*, 116.

¹⁴⁹ Finley, *Fields of Combat : Understanding Ptsd among Veterans of Iraq and Afghanistan*, 70.

¹⁵⁰ Former Staff Sergeant II, "Interview for Chaplain Todd's Thesis: "Good to Go!" :Marines, Combat and the Culture of Silence."

¹⁵¹ Former Marine Infantry Sergeant, "Interview for Chaplain Todd's Thesis, "Good to Go!: Marines, Combat and the Culture of Silence."'"

¹⁵² Sergeant II, "Interview for Chaplain Todd's Thesis: "Good to Go!" :Marines, Combat and the Culture of Silence.."

¹⁵³ Former Corporal III Marine Infantry, "Interview for Chaplain Todd's Thesis: *"Good to Go!: Marines, Combat, and the Culture of Silence"*" (2014).

¹⁵⁴ Sergeant II, "Interview for Chaplain Todd's Thesis: *"Good to Go!": Marines, Combat and the Culture of Silence.."*